

“IT’S ALL IN YOUR HEAD”: BLACK AND LATINX STUDENTS’ MENTAL HEALTH
EXPERIENCES FROM THE PERSPECTIVE OF THEIR COUNSELORS AND TEACHERS

Anna Lee Carothers

TC 660HA and TC 660HB

Plan II Honors Program

The University of Texas at Austin

May 10, 2019

Kevin Cokley, PhD
College of Education
Supervising Professor

Pedro Reyes, PhD
College of Education
Second Reader

Abstract

The purpose of this study was to analyze how counselors and teachers manage and perceive the mental health of black and Latinx students in a small urban school. The literature on American black and Latinx students' mental health lacks qualitative research on how black and Latinx students' counselors and teachers recognize their mental health problems and intervene in multiculturally sensitive ways. First, this study examined current research on how black and Latinx students' mental health is affected by demographic stressors, ethnic identity, family, cultural stigma, and school environment. Second, this study reviewed current research on how counselors and teachers have helped their black and Latinx students' mental health. Third, by using a case study approach, a sample of Texas charter high school's counselors and teachers were selected for in-depth interview questions. The interviews were coded and analyzed through the interpretivist paradigm and grounded theory.

The analysis showed that black and Latinx students experience unique, ethnically based mental health stressors and stigma. The research also confirmed that counselors and teachers who establish a strong, multiculturally sensitive relationship with their students and promote mental health awareness improve their black and Latinx students' mental health. Based on the findings, it is recommended that all counselors and teachers follow the example of this case study's educators.

Acknowledgments

I am tremendously grateful to Dr. Cokley and Dr. Reyes for their constant support throughout my research and writing process. Their insight and guidance have been invaluable, and they have inspired me to strive for excellence in all that I do. I would also like to thank all those in the Plan II Honors Program – especially the faculty. This program was absolutely the perfect fit for me as a young adult, and I cannot imagine my college career being any other way. Through the Plan II Honors Program, I have expanded my mind and have been dazzled by the talents and eccentricities of my professors and peers. Of course, I must thank my family and friends, for I would never be here or the person I am today without them. Lastly, I would like to thank all of my past teachers, professors, and counselors. I dedicate this thesis to them, for they have fostered my passion for education and knowledge, as well as my desire to make a difference in the education field.

TABLE OF CONTENTS

Abstract	1
Acknowledgements	2
Chapter 1: An Introduction	5
Chapter 2: A Literature Review	9
2.1: Demographic Issues and Stressors	9
2.2: Ethnic Identity	13
2.3: Family	21
2.4: Cultural Stigma	26
2.5: School	37
2.6: A Summary and Further Considerations	44
2.7: Gaps in the Literature	49
2.8: Purpose of the Study and General Methods	50
Chapter 3: Methods and Procedures	53
Chapter 4: Results	57
4.1: Knowledge of Black and Latinx Students' Stressors	57
4.2: Recognition of Signs of Stress	60
4.3: Observation of Mental Health Expression and Stigma	62
4.4: Belief in Relationship-Building and Promoting Social Justice	64
4.5: Recommendations for Less Homework, More Balance and Coping Skills	69
Chapter 5: Conclusions	73
5.1: Discussion	73
5.2: Limitations	76

5.3: Closing Remarks	77
References	78
Biography	90

Chapter 1:

An Introduction

Some say that mental illness is something that is just “all in your head.” When some say this, they often mean to say that a condition that exists in the brain and is otherwise invisible to others might as well be an illusion. With this logic, a condition like this merits no credence, and those with this condition should simply “get over it” or “snap out of it” or “stop being so selfish.” However, it is ironic that no one ever says these things to someone who has brain cancer, and that condition is also “all in your head” and virtually invisible to others.

The reality is that a mental illness is no less significant than a physical illness, just as mental health is no less significant than physical health, because our minds and bodies are inextricably linked. Consequently, mental health is part of our livelihood, and to deny someone the freedom to speak their concerns about their mental health or to deny someone access to mental health treatment is to deny someone their livelihood. Unfortunately, these two denials happen consistently with the United States ethos of “pulling oneself up by one’s bootstraps,” and that stigmatizes mental illness – especially for black and Latinx individuals. This process of denial begins as early as childhood for black and Latinx individuals when they enter the school system, in part because of cultural misinformation and in part because most school systems are not equipped to give black and Latinx students the understanding and culturally applicable treatment that they need. As my thesis will argue, this is a grave injustice that enforces discrimination in the deepest, most sensitive place: the mind.

This is not to suggest that school systems are not well intentioned. However, as will be expanded upon in detail in Chapter 2, in spite of the fact that white student populations are decreasing and Latinx student populations in particular are rapidly increasing, 80% of teachers

are white women. Furthermore, the majority of teachers have expressed for decades that they do not feel prepared to help their black and Latinx students because of lack of training and a lack of knowledge on black and Latinx issues. To make matters worse, because of this lack of information, school curricula and mental health resources do not target black and Latinx students. As a result, black and Latinx students feel less engaged in school systems and feel far less inclined to ask for mental health resources. This reinforces their pervasive cultural belief that mental illness is only a “white person’s problem” and that they do not need or deserve help. As one can imagine, this can cause serious damage on these black and Latinx adolescents’ emotional development and academic success. For this reason, this thesis offers a clarion call for multiculturalist tactics that will remedy this injustice. As defined by Carroll (2009, as quoted in Proctor & Simpson, 2016), multiculturalism in the school system refers to a “worldview that recognizes and values diverse learners, including the intersecting dimensions of individual identity and cultural background” (p. 252-253). It is through multiculturally aware counselors and teachers that black and Latinx students can receive proper treatment and grow into emotionally balanced adults.

To be sure, not all counselors and teachers are unaware of multiculturalism in practice. In fact, as my thesis case study will show, there are quite a few multiculturally aware counselors and teachers that know how to effectively intervene when they see that their black and Latinx students are struggling with their mental health. These are the counselors and teachers most needed in the twenty-first century. However, multiculturally aware counselors and teachers currently do not seem to have much of a voice in the current scientific literature on black and Latinx students’ mental health. Currently in the scientific literature, there is extensive quantitative evidence and some qualitative evidence that support how black and Latinx students’

demographic stressors, ethnic identity, family, cultural stigma, and school environment affect their mental health positively or negatively. Yet, in the scientific literature, there are several gaps that need to be addressed:

I. How counselors and teachers recognize specific mental health issues of black and Latinx students

II. The counselor and teacher perspective on their black and Latinx students' mental health and how counselors and teachers can access resources to help their black and Latinx students

III. Qualitative studies on the mental health experiences of people of color that, according to Fripp and Carlson (2017), will allow researchers to better understand the relationship that people of color have with mental health stigma in nuanced, human ways that cannot be gleaned from quantitative evidence

I argue that gathering the perspective of multiculturally aware counselors and teachers through qualitative means is an essential addition to the current literature. Without their useful perspective, the counselors and teachers who currently are ignorant of multiculturalism will remain so and will inadvertently do a major disservice to their black and Latinx students' mental health and overall wellbeing. Therefore, in my thesis, I have three main goals:

I. To provide a literature review of the current evidence on how black and Latinx students' mental health is impacted by demographic stressors, ethnic identity, family, cultural stigma, and school environment

II. To demonstrate how the factors that affect black and Latinx students' mental health have been and should be addressed by counselors and teachers

III. To offer a qualitative case study of interview responses from a sample of multiculturally aware counselors and teachers that will close the gaps in the current literature

My hope is that this thesis – especially the case study – will give other counselors and teachers the chance to understand more deeply the mental health experiences of their black and Latinx students and how they, as school professionals, have the opportunity and obligation to help. The perspectives of counselors and teachers who live out multiculturalism in the classroom and have close connections with their black and Latinx students are the perspectives that all other counselors and teachers and school systems in particular should value the most. There is no longer an excuse for black and Latinx students' mental health to be neglected by counselors and teachers, given the growing population of students of color across school districts. Ultimately, approaching black and Latinx students' mental health concerns or troublesome behavior with a multiculturalist philosophy is necessary in order to ensure that these students are cared for and given the development they deserve.

Chapter 2:

A Literature Review

2.1: Demographic Issues and Stressors

How is the daily experience environmentally and societally for black and Latinx individuals different from the daily experience environmentally and societally for white individuals? Of course, we must first acknowledge that not all black and Latinx communities are homogeneous and that, while there are trends among the black and Latinx communities generally, this does not mean that there are not differences among black and Latinx communities due to region and family background. Indeed, any counselor and teacher must recognize this truth if they are to best help their black and Latinx students overall; they must approach each student with an open mind. However, given the nature of this thesis, it would be difficult to expand on every unique (though academically noteworthy) facet of the black and Latinx communities. Furthermore, even while there is not one way to define the black social experience and the Latinx social experience, the question of how black and Latinx individuals may have environmental and societal experiences different from their white counterparts is not superficial. This question addresses how the societal and environmental factors that may play a part in white individuals' mental health may not be the same societal and environmental factors that may play a part in black and Latinx individuals' mental health.

While we must be careful not to homogenize black and Latinx individuals, we must also take note of some statistically prominent societal stressors that affect black and Latinx individuals at large so that we can better understand how such societal stressors might affect black and Latinx individuals' mental health in the classroom. Consequently, in this portion of

this chapter, I shall assess the overarching demographic trends seen in the literature on black and Latinx individuals and families and keep my focus fairly broad.

In general, among black and Latinx communities, it is far less feasible to access reliable healthcare. Even though the Affordable Care Act between the years 2013 and 2016 allowed for 4 million more Latinxs and 1.8 million more black people to receive health insurance, black and Latinx children and elderly adults are still far less likely to have private health insurance than are their white counterparts (Artiga, Foutz, & Damico, 2018). In fact, Latinx children are two times more likely than are white children to be uninsured, and uninsured Latinx children represent 8% of the Latinx population. Even for the nonelderly black adults who are eligible for Medicaid, they are still less likely to receive assistance because they typically live in southern states that have not accepted the expansion of Medicaid. Furthermore, nonelderly Latinx adults are often not even eligible for Medicaid, regardless of their home state, because of their immigration status. In fact, only 45% of Latinxs are eligible for Medicaid because of their immigration status (Artiga et al., 2018). These statistics are significant because they show racial discrimination, as well as black and Latinx individuals' subsequent struggle to receive help for their health – including their mental health. Indeed, only 10% of black and Latinx adolescents seek out mental health services; even when they do, the quality of care is not at the standard that their white counterparts receive (Fox et al., 2007; Substance Abuse and Mental Health Services Administration, 2009, as cited in Bains, Franzen, & White-Frese', 2014). But, unfortunately, lack of healthcare is just the beginning, and it stems from other important environmental and societal factors that may contribute to mental health problems for black and Latinx individuals.

According to the Pew Research Center (Krogstad, 2014), as of 2013, 23.5% of the Latinx population (compared to 9.6% of the white population) was in poverty in the United States. This

reality is striking for the Latinx population overall, considering how quickly the Latinx population is growing. Between the years 2012 and 2013 alone, one million more Latinxs were added to the United States population (Krogstad, 2014). The Latinx youth population in particular – defined as Latinxs 35 years old or younger – is also quickly growing. In 2016, 61% of Latinxs in the United States were 35 years old or younger, and the Latinx youth population increased 20% between 2006 and 2016. Furthermore, as of 2018, Latinxs are the youngest ethnic group in the United States, with a median age of 28 (Lopez, Krogstad, & Flores, 2018). Statistically, then, if the Latinx population and the future of the Latinx population (the youth, which includes Latinx students) continues to be overrepresented among those in poverty, this will have a deleterious effect on the United States on social and economic levels.

Much of this poverty is a reflection of how many Latinxs have higher unemployment levels, more children on average, low-income occupations, and little education (Burke, Gabe, Rimkunas, & Griffith, 1985, as cited in Garrison, 1999; Zambrana, 2011). While, notably, Cubans and Puerto Ricans are statistically more likely than Salvadorans and Mexicans to graduate from high school (Zambrana, 2011), overall, as of 2018, only 22.6% of Latinxs have bachelor's degrees. This makes Latinxs the least likely of any ethnic group to obtain a bachelor's degree (Barshay, 2018). As a result, Latinxs are more likely to work in sectors related to production, service, and construction than are their white counterparts. Latinxs are also less likely to have managerial status than are their white counterparts (Zambrana, 2011).

An immigrant background – whether that be first-generation or otherwise – can also have effects on Latinx mental health. While these specific effects depend on generation status and will be expanded upon later in this chapter (see section 2.2 for reference), it is important to understand some basic vocabulary on how immigration impacts mental health. Immigration

results in the process of “acculturation,” or the adaptation to a host country through cultural changes at the individual and group level (Berry, Trimble, & Olmedo, 1986, as cited in Gonzales, Fabrett, & Knight, 2009). Acculturation, in turn, may bring about “acculturative stress,” which is defined as psychological stress as a direct result of acculturation (Berry & Annis, 1974). Considering how, as of 2016, 63.3% of Latinxs in the United States are from Mexican descent (Flores, 2017), it is important to consider how immigration status and generation status affect Latinxs’ mental health through acculturative stress. In fact, studies have shown that a great deal of acculturative stress contributes to a deteriorated psychological state (Williams & Berry, 1991).

In 2013, 27.2% of the black population was in poverty (Krogstad, 2014). In addition, as of 2016, the median income for a white household was \$171,000, and the median income for a black household was \$17,100. This means that black households are worth ten cents for every dollar of white households. With that said, this income gap is not universal for all white and black households. Between the years 2007 and 2016, the gap between white and black households of low income decreased, but the gap between white and black households of middle income increased. Moreover, it is notable that, as of 2017, the U.S. Census Bureau reported that 87% of the black population aged 25 and older completed high school. This is the highest percentage on record for the black population. However, this percentage still does not compare to the white population academically. Among the white population, 94% has obtained a high school degree (Bialik, 2018). Meanwhile, as of 2018, 30.8% of the black population has obtained a bachelor’s degree, and 47.1% of the white population has obtained a bachelor’s degree (Barshay, 2018).

Latinx immigrants are not the only immigrant group of growing numbers in the United States. The black immigrant population is growing twice as fast as the overall immigrant population on average. As of 2016, there were about 4.2 million black immigrants living in the United States; in 1980, the black immigrant population was at a mere 816,000. Since the year 2000 alone, the black immigrant population has grown 71%. Much of this increase in black immigrant population comes from African immigrants in particular, making up 39% of the black immigrant population in 2016. Even so, however, 49% of black immigrants are from the Caribbean (Bialik, 2018). This trend in immigration shows that acculturative stress, too, can affect a great deal of the black population.

2.2: *Ethnic Identity*

Ethnic identity can be understood as an individual's personal sense of belonging to their particular ethnicity, understanding of their particular ethnicity, preference for their particular ethnicity, and enjoyment of participating in their ethnic activities (Phinney, 1990, 1996). Ethnic identity, therefore, exists on a spectrum and is a "psychological process" (Gonzales, Gabrett, & Knight, 2009, p. 119), which hopefully results in the individual resolving any tension surrounding their ethnicity and feeling content with their ethnicity (Umaña-Taylor, Yazedijan, & Bámaca-Gomez, 2004).

Many studies have affirmed that a great deal of ethnic identity is related to high self-esteem (Martinez & Dukes, 1997; Phinney et al., 1997, Umaña-Taylor et al., 2004) because confidence in one's ethnicity has been shown to serve as a useful coping mechanism in the face of racial discrimination (Phinney, 1990) and as a common trait in those who are more prosocial and who value their families highly (Armenta et al., 2009, as cited in Gonzales et al., 2009).

Indeed, ethnic identity in relation to self-esteem is particularly important to examine for other practical reasons. Studies have shown that low self-esteem is related to black individuals engaging in risky behavior like substance use and smoking (Botvin et al., 1993, as cited in Mandara, Gaylord-Harden, Richards, & Ragsdale, 2009; Unger, Kipke, Simon, Montgomery, & Johnson, 1997). Studies have also shown that low self-esteem is related to black children's and black adolescents' repressed anger (Johnson & Green, 1991), depression (Caldwell, Antonucci, Jackson, Wolford, & Osofsky, 1997), and anxiety (Matthews & Odom, 1989; Youngstrom, Weist, & Albus, 2003).

According to a study by Mandara and colleagues (2009), self-esteem and racial identity have profound effects on individuals' depression and anxiety symptoms at a young age. It is worth noting that, while these researchers chose to use the term "racial identity" in their study, their definition of "racial identity" is very much aligned with Phinney's definition of ethnic identity (1990, 1996). Therefore, I considered the results from this study to align with my search on how ethnic identity affects black and Latinx students' mental health. Mandara and colleagues (2009) defined racial identity as an amalgamation of many measures: the subjective feelings of pride one has for one's racial group, one's understanding and comfort that one has towards one's racial identification, one's sense of activities that one shares with one's racial group, one's knowledge of one's racial history, and one's personal beliefs about the characteristics of one's racial group. In this study, the researchers surveyed and documented the activities of over 250 black students throughout six public-schools in Chicago twice: once while the students were in seventh grade and then once more a year later in the eighth grade. These students were surveyed with the Children's Depression Inventory (CDI), the State-Trait Anxiety Inventory for Children (STAI-C), and the Multigroup Ethnic Identity Measure (MEIM). These surveys were used to

quantify the students' depressive symptoms, anxiety symptoms, and racial identity, respectively. Self-esteem was quantified by having the students document their own feelings. The students were instructed to wear special watches that were programmed to set off an alarm randomly throughout the day for exactly one week. Whenever the alarm on their watch went off, the students had to rate on a scale of 1 to 4 (with 1 being "not at all" and 4 being "very much") how much they felt tough, respected, important, and prideful.

Ultimately, Mandara and colleagues (2009) found that both self-esteem and racial identity were significant predictors of black adolescent students' mental health one year later. The researchers found that the boys with high levels of racial identity showed fewer depressive symptoms in the seventh and eighth grade. Similarly, the girls with high levels of racial identity showed fewer depressive symptoms in the eighth grade. However, the association with "high racial identity" and "low depressive symptoms" was not as strong as it was for the boys. Self-esteem's effect on the girls' mental health showed a similar pattern, but the pattern was not as significant as it was for racial identity's effect on the girls' mental health. For boys, on the other hand, low depressive symptoms were entirely associated with high racial identity and not self-esteem. The researchers also found that the effects of self-esteem and racial identity on anxiety were not as strong. When the boys and girls demonstrated an increase in racial identity, their anxiety symptoms decreased – but the relationship was not nearly as significant as it was for an increase in racial identity relating to a decrease in depressive symptoms. In any case, the researchers determined two things: first, that having a high racial identity relates to better mental health in black adolescents; second, that high racial identity is just as important to black adolescents' mental health as is high self-esteem.

Students of color who have positive feelings toward their ethnicity have also related to higher grades in school (Cokley & Chapman, 2008; Schwarz et al., 2007, as cited in Gonzales et al., 2009). This is significant in regards to mental health, according to Gonzalez and Padilla (1997), because children who succeed academically in spite of stressful circumstances show “academic resilience” and, thus, better coping skills overall. For example, if black and Latinx students who experience difficult daily challenges still manage to have above average GPAs, they are demonstrating that their mental health is more stable than the mental health of their peers and counterparts who are struggling academically. In Gonzalez and Padilla’s (1997) study, the researchers assessed over 2,100 Mexican American high school students’ answers on a 314-question survey that assessed students’ peer relationships, familial relationships, self-esteem (including academic self-esteem), taxing life events, sense of belonging to a school, and ethnic awareness and pride. The researchers then compared these answers on the survey to the students’ GPAs in order to assess which traits as measured on the surveys were related to academic resilience. Interestingly, while cultural loyalty did not predict resilience, cultural pride (high levels of ethnic identity) did.

Similar results were found by Cokley and Chapman (2008) in their study that examined their theoretical model of how anti-white attitudes, ethnic identity, other-group orientation, perceptions of caring faculty, academic self-concept, and undervaluing academic success predict academic achievement of black students at historically black universities. In this study, 274 college students who identified as African American took several questionnaires: the Multigroup Ethnic Identity Scale (MEIM), Immersion—Emersion Anti-White Subscale (IEAW), Devaluing Academic Success Subscale (DASS), Academic Self-Concept Scale (ASCS), and Perceptions of Caring Faculty Subscale (PCFS). The researchers then compared the students’ responses to their

GPA's. Unsurprisingly, those who had a high academic self-concept (defined as the positive or negative feelings that an individual has about their academic capabilities) had higher GPA's. Conversely, the students who had prominent anti-white attitudes and feelings that devalued academic achievement had lower GPA's. Most importantly for this section of the thesis, the researchers also found that ethnic identity indirectly had a positive relationship to GPA because higher levels of ethnic identity related to higher levels of academic self-concept. This suggested to the researchers, therefore, that ethnic identity was, in fact, significant in determining African American students' academic success. The researchers thus concluded: "[Educators] should focus on fostering a strong, positive ethnic identity among African American students which should include exposure to the many intellectual and academic successes of African Americans" (p. 362). The researchers further argued that including strong African American figures in an academic curriculum will not only engender in African American students a positive ethnic identity but also a positive academic self-concept.

But of course, it is often difficult to have a positive ethnic identity or positive academic self-concept for many black and Latinx students. Many ethnic minority students attend schools and institutions that are majority-white and consequently may face psychologically damaging experiences such as blatant discrimination and isolation (McClain et al., 2016). As a result, black and Latinx students, for example, may experience "minority status stress," which is defined as stress due to discrimination and racism, racially-charged comments from others, and accusative questions of whether minorities even "belong" in a particular location – like a college campus (Smedley, Myers, & Harris, 1993). Similarly, black and Latinx students may also experience impostor syndrome: an internalized belief that one is intellectually inferior or undeserving of their accomplishments (Clance & O'Toole, 1978). Through impostor syndrome, a black or

Latinx student may deeply internalize the racist belief that they are not worthy of being successful and, if they are successful, they are simply fakes. Indeed, in a study by McClain and colleagues (2016), it was found that black college students at predominantly white institutions (PWUs) who scored highly on the Minority Status Stress Scale (MSSS) and highly on the Clance Impostor Phenomenon Scale (CIPS) had low scores on the Mental Health Inventory-18 (MHI-18). In this study, minority status stress and impostor syndrome appeared to have equally negative effects on black college students' stress. However, in another study by Cokley and colleagues (2013, as cited in McClain et al., 2016), the researchers found that impostor syndrome had greater negative effects on ethnic minority students' mental health than did minority status stress. Ultimately, it can be concluded that both minority status stress and impostor syndrome are barriers for students of color because they both bring about poorer mental health.

According to McClain and colleagues' (2016) study, it was ethnic identity, rather than minority status stress and impostor syndrome, that was the greatest predictor of the black college students' mental health. This finding corroborated the findings of previous similar studies (Smith & Silva, 2011; Williams et al., 2012) and suggested to McClain and colleagues (2016) that it is black college students' own personal regard for their ethnicity that affects how they react to minority status stress or impostor syndrome, rather than the other way around. This means, therefore, that if a black college student has high ethnic identity, they will be better able to cope with racial (or racist) stressors in their lives. Because of this, McClain and colleagues (2016) recommended that counselors teach their black college students how their own perception of their ethnicity has a significant impact on their own mental health. McClain and colleagues (2016) also recommended that counselors should work to help their black college students

“explore their cultural selves” (p. 113) so that they can find healthy ways to understand both their university environment and themselves as individuals.

Similar deductions have been reached by Jones and colleagues (2007) and Franklin-Jackson and Carter (2007). Jones and colleagues (2007), in their study of self-identified African American and Caribbean women, found that the participants who scored at least one standard deviation higher than the average Cross Racial Identity Score (CRIS) of all the participants were less likely to experience negative mental health impacts due to race-related stressors like discrimination. Conversely, the participants who scored at least one standard deviation lower than the average CRIS of all the participants were more likely to experience negative mental health impacts due to race-related stressors like discrimination. Franklin-Jackson and Carter (2007), in their study of 255 black American adults, found that the participants who had deeply internalized their black identity and were comfortable with their identity were more likely to notice racial stressors but were also more likely to have better mental health.

From all of these studies, it can be concluded that a healthy understanding and acceptance of one’s ethnic identity serves as a protective barrier against instances of racism and race-related stress. However, it is important to note that ethnic identity is not merely identifying as being “black” or “Latinx.” Ethnic identity can exist along spectrum – not just in terms of the full realization of ethnic identity but also in terms of how one understands the pieces that encompasses one’s ethnic identity. For example, one may not simply identify as just “black.” One may also identify as “black,” “American,” and “Jamaican,” or “part black and white.” Similarly, one may not simply identify as just “Latinx.” One may also identify as “Latinx,” “American,” and “Mexican” or just “Latinx” and “Mexican,” even though one lives in the United States. These “labels” of sorts also are not static. They may change in individuals over time,

depending on when (or whether) they or their family members immigrated to the United States or depending on the personal experiences in the United States – including acculturation and acculturative stress.

J. W. Berry's dual axis model (1980, as cited in Gonzales et al., 2009) is a groundbreaking theoretical structure that helps explain the dimensions of ethnic identity through both acculturative and enculturative processes. To review, "acculturation" describes the process whereby one adapts and changes in order to fit in with the demands of the host culture (see section 1.1 for reference). "Enculturation," on the other hand, describes the process whereby one maintains the behaviors, language, beliefs, and values of one's home culture (Gonzales et al., 2009). In Berry's model, there are four dimensions into which an individual's ethnic identity can reside.

1. *Bicultural/integration*: the dimension where an individual feels fully immersed in both their host and home cultures
2. *Assimilation*: the dimension where an individual abandons a connection to their home culture and fully adapts to the host culture
3. *Separation/withdrawal*: the dimension where an individual holds onto the practices and beliefs of their home culture and completely foregoes the practices and beliefs of the host culture
4. *Alienation/marginalization*: the dimension where an individual does not identify with either the host culture or the home culture

As we will see in section 2.3, these dimensions are particularly important for black and Latinx individuals from immigrant families. Certainly, not all family members in one family will be within the same dimension in the dual axis model, thereby causing familial tension and different

ethnic identities in one household. The complex interactions found in ethnic identity and the consequences of ethnic identity, therefore, should not be overlooked by counselors and teachers when they engage with their black and Latinx students.

The research shows that counselors and teachers should help foster a strong sense of ethnic identity in their students so that their mental health and resiliency against racial stressors are fortified. However, counselors and teachers should also be careful not to assume the ethnic identity of their students. Instead, they should take care to help their students explore their ethnic identity for themselves – whatever that ethnic identity may be – and adopt it with pride.

2.3: Family

Many researchers have found that closeness to family has a positive impact on Latinxs' mental health. From a cultural standpoint, this certainly is not surprising, given how Latinxs, regardless of nationality, deeply value a strong connection with and loyalty to their family members (Hidalgo 1998; Hurtado, 1995; Trueba 1999, as cited in Zambrana, 2011). For Latinxs, family is associated with “security, nurturance, love, and comfort” and is even elevated as something “sacred” (Baca Zinn & Eitzen, 2002; Rodriguez, 2009, as cited in Zambrana, 2011, p. 45).

Garcia and colleagues (2008) found that, in a study based on the responses from the 2004 Minnesota Student Survey (MSS) from over 3,000 Latinx students between grades 9 and 12, emotional closeness with family was inversely related to depression, suicidal ideation, and suicide attempts. The researchers assessed the following responses from the students: the student's perception of how caring their parents are for them, the student's perception of how communicative they are with their parents, the student's perception of how connected they are

with their family members, the student's degree of suicidal ideation, and the student's number of suicidal attempts. The final two responses contributed to the researchers' created "emotional distress" score for the students, which was computed along a six-item scale of emotion. The students whose score was more than one standard deviation away from the average score were considered to be experiencing greater emotional distress than normal.

The researchers found several key findings related to familial influence on the Latinx students' mental health. Latina students in the ninth grade were the most likely to have attempted suicide within the past 12 months, and these students were more likely to report that they did not feel emotionally close with their families. Emotional distress was also more likely among the ninth grade girls when they reported that they had difficulty communicating with their fathers. Among both Latino and Latina ninth grade students, the rate of suicidal ideation within the past 12 months was at its highest when the students indicated that their parents were not present in their lives. In contrast, the Latino and Latina ninth grade students who said that they were able to communicate with their parents on a regular basis were less likely to have expressed instances of suicidal ideation within the last 12 months. However, ninth grade Latinos and Latinas were not necessarily more vulnerable than their older peers in all categories. For Latinos and Latinas in grades 9 through 12, the likelihood of suicide attempts was much higher if the student perceived that their parents did not care for them. In fact, among the students who indicated that their parents did not seem to care for them, suicide attempts were 3.4 to 9.9 times more likely.

Research has also shown that closeness with family relates to Latinx students' higher academic achievement in spite of obstacles, which, according to Turner and Llamas (2017), relates to higher self-esteem. Gandara (1995, as cited in Gonzalez & Padilla, 1997) found that, among 50 Mexican American adolescents who obtained postbaccalaureate degrees and whose

parents had not completed a high school education, parental support was one of the most significant factors that led to their own success. The parents of these high-achieving Mexican American individuals consistently pushed their adolescents to succeed, and they even helped with homework whenever possible (Gandara, 2005, as cited in Gonzalez & Padilla, 1997). Similar results have been found in other studies. In a study by Okagaki and colleagues (1994), the researchers found that, while the Mexican American adolescents and parents in their sample all believed that education was important, the more high-achieving adolescents had parents who had set more rigorous standards for their adolescents. For instance, the parents of the more high-achieving adolescents were more likely to insist that their adolescents have some sort of college or vocational training after they graduated from high school. These same parents were also more likely to be distressed by low grades on their adolescents' work. It seemed that this determination and parent—adolescent relationship grounded in high expectation provided more of a drive for the adolescents to succeed.

Unfortunately, it is not uncommon for Latinx adolescents to feel strain in their family relationships and not receive the connection that will help promote their academic success and self-esteem, especially when acculturative stress plays a factor. Because acculturation exists on a spectrum (see section 2.2 for reference), it is entirely possible for family members to relate to different places on the spectrum. Such differences in acculturation levels create “acculturation gaps,” where values between generations conflict (Gonzales et al., 2009). As a result, conflict among family members may arise (Gonzales, Deardorf, Formoso, Barr, & Barrera, 2006; Samaniego & Gonzales, 1999), and parents may become less involved with their adolescents (Dinh, Roosa, Tein, & Lopez, 2002). In most cases, after a Latinx family immigrates to the United States, the Latinx parents are more likely to retain their home culture and adapt less

quickly to the host culture. In the meantime, their adolescents are more likely to adapt more quickly to the host culture (Szapocznik, Kurtines, Santisteban, & Rio, 1990, as cited in Gonzales et al., 2009). The parents then may struggle to understand their adolescents, and they may also feel that their authority is slipping (Kurtines & Szapocznik, 1996, as cited in Gonzales et al., 2009). Meanwhile, the adolescents will respond to this estrangement with maladjustment, showing itself through increased substance use (Eamon & Cray, 2005; Gfroerer & Tan, 2003; Gil, Wagner, & Vega, 2000, as cited in Gonzales et al., 2009) and perhaps even early sexual activity, sexual violence, and a greater number of sexual partners (Reynoso, Felice, & Shragg, 2002, as cited in Gonzales et al., 2009; Sabogal, Pérez-Stable, Otero-Sabogal, & Hiatt, 1995; Upchurch, Aneshensel, Mudgal, & McNeely, 2001, as cited in Gonzales et al., 2009).

Yet, it is interesting to note that, in the right conditions, family can serve as a mediator for acculturative stress in Latinx adolescents, especially when traditional, cultural practices are deliberately maintained in family interactions. These traditional, cultural practices allow for family relationships to remain strong and for a decreased likelihood of acculturative stress affecting Latinx adolescents, especially when they transition through important stages in life (Heilemann, Frutos, Lee, & Kury, 2004; Page, 2004, as cited in Gonzales et al., 2009). In a study by Germán and colleagues (2009), the researchers found that the continuation of familism values allowed for the Mexican American adolescents studied to associate less with risk-prone peers and to express less delinquent behavior. Ultimately, this means that family relationships have an indirect yet positive effect on Latinx adolescents' mental health and life choices. With familial support and a connection to the home culture that ties the family unit together, Latinx adolescents have somewhat of a "stress buffer" that makes the process of adaptation to the host culture less daunting.

Even though I have thus far mentioned how family stresses and support have profound effects on the mental health of Latinx adolescents, this is not to say that family stresses and support do not also have profound effects on the mental health of black adolescents. According to Gaines and colleagues (1997), black communities are similar to Latinx communities in that they highly endorse familism as part of their innate value system. As a result, black adolescents' relationship with their family will have a similarly significant effect on their wellbeing – for better or for worse.

Voisin and colleagues (2016) are just few of the many researchers who argue that family interactions have a tremendous effect on black adolescents, especially through the lens of family stress theory. According to this theory, family members' experience with stressful events like mental illness, substance abuse, and adult incarceration will disrupt the family unit and make family members less emotionally capable of helping one another (Voisin, Elsaesser, Kim, Patel, & Cantara, 2016). Furthermore, this theory suggests that if older family members experience these sorts of stressful events, it is more likely that the adolescents in the family will be more susceptible to personal experience with similarly stressful events (Brakefield, Wilson, & Donenberg, 2012; Conger et al., 2002; Elkington, Bauermeister, & Zimmerman, 2011; Hammack et al., 2004). In 2016, Voisin and colleagues assessed how family stress theory affected black adolescents who had family members who had been incarcerated, experienced mental health difficulties, and abused substances. The researchers found that the black adolescents who had family members affected by these aforementioned stressful experiences were 1.2 times more likely to experience terror or thoughts of suicide than were their peers who did not have a similar family situation. Overall, the black adolescents who experienced more familial stressors were also 1.5 times more likely to have had unprotected sex within the past

year, 1.4 times more likely to have used marijuana at least once, and 1.1 times more likely to have consumed alcohol at least once.

Ultimately, an adolescent's development is a product of both the direct and indirect influences of an adolescent's caregivers (Serbin & Karp, 2004). This is especially true for black and Latinx adolescents, who on average possess more familism values than do their white peers (Gaines et al., 1997). Given how black and Latinx communities in general greatly value their families and that family stressors have negative effects on black and Latinx adolescents, it is essential for counselors and teachers to instill in their black and Latinx students positive coping skills and communication skills that relate to interactions with family members. When counselors and teachers intervene in this way, they are giving their black and Latinx students the chance to nurture the familial bonds that contribute to their own identity and wellness.

2.4: Cultural Stigma

While, of course, school systems should in general offer more mental health resources directed toward their black and Latinx students, they should also be aware of how cultural stigma on mental health treatment and mental illness (otherwise known as mental health stigma) affects black and Latinx communities. After all, even if somehow a school system is able to increase the number of mental health services available to students, students of color's negative attitudes toward mental health services might disincentivize them from seeking out such services at all. Indeed, much research has found that mental health stigma is one of the most significant reasons why people of color do not seek help for their mental health conditions (DeFreitas, Crone, DeLeon, & Ajayi, 2018; Fripp & Carlson, 2017). According to Fripp and Carlson (2017), stigma is also one of the most difficult issues to tackle because it cannot immediately be altered. Mental

health stigma is a systemic dilemma that is ingrained in the very ideology of entire communities. Consequently, when one tries to adjust this ideology, one is trying to adjust the identity that has been acquired over many years by an individual or group of people. This process can understandably draw out some resistance. However, breaking mental health stigma is not impossible, and it can be done in such a way that does not demean the cultural beliefs of black and Latinx students. If school systems want to offer mental health services to all students equally and substantially, they must necessarily address how black and Latinx students experience mental health stigma.

According to Pattyn and colleagues (2014), “stigma” in general can refer to the internalization of negative stereotypical beliefs about others, or it can refer to the internalization of the discriminatory behavior one has seen toward others. Stigma has also been defined by Fink and Tasman (1992, as cited in Fripp & Carlson, 2017) as the experience of being the target of negative behavior from a practitioner, family member, or friend. In the context of mental health stigma, DeFreitas and colleagues (2018) aptly defined it as a specific stigma where individuals have negative attitudes toward those who have a mental illness or have sought out mental health treatment. It is also important to note that this mental health stigma can be perceived or personal. Perceived mental health stigma is a measurement of how an individual assesses the public’s negative opinions about those with mental illness. Personal mental health stigma is a measurement of an individual’s own negative feelings about those with mental illness (DeFreitas et al., 2018). In my thesis, mental illness will be understood in all of these terms stated above, with two additional considerations of my own. First, mental health stigma can be conscious or unconscious. Second, it is entirely possible for an individual to stigmatize oneself because they

experience the cognitive dissonance of needing mental health help and believing that mental health treatment is a sign of weakness or inferiority.

Research has shown that while mental health stigma can manifest itself in different ways within black and Latinx communities, it is definitely a conscious phenomenon in both communities that has direct influences on individuals' behaviors, particularly their help-seeking behaviors. Fripp and Carlson (2017) found that black and Latinx college students who had explicit, negative attitudes toward those who sought mental health treatment (for instance, by strongly agreeing with the statement "the idea of talking about problems with a psychologist strikes me as a poor way to get rid of emotional conflicts") were far less likely to seek out treatment themselves. Furthermore, Fripp and Carlson (2017) found that the black and Latinx college students who knew about the stigma surrounding mental health in their community were far less likely to seek out treatment themselves. Similar research has shown that this sort of conscious mental health stigma is so powerful that it can have severely negative effects on a person's psyche and ability to form bonds with others. For example, in Magaña and colleagues' (2007) research on Latinxs who were caring for a family member with schizophrenia, the Latinxs with greater mental health stigma were more likely to develop depressive symptoms because they were less likely to talk with their community and gain emotional support.

Unfortunately, mental health stigma in black and Latinx adults affects not only themselves but also their own children. Villatoro and colleagues (2018) researched this very phenomenon when they assessed how parents of sixth graders from 14 Texas schools viewed mental illness and potential mental illness symptoms in their children. In this sample, 75% of the parents identified as some sort of minority group, with Latinx identity being the most common and black identity being the second most common. In this study, the parents were asked to

answer “yes” or “no” to the question of whether or not they had noticed problematic mental health symptoms in their children. Next, the parents were presented with two stories about two children: one who displayed symptoms of bipolar disorder and the other who displayed symptoms of social anxiety disorder. The parents then had to indicate whether or not they believed that these children had some sort of mental illness. Lastly, the parents had to complete three surveys that assessed their feelings of social distance around those with mental illness and knowledge of and attitudes about people with mental illness. The researchers found that the parents who possessed more mental health stigma could not easily recognize mental health symptoms in their own children but could easily assess that the children in the stories had noticeable symptoms of a mental health condition. In addition, the parents who possessed more mental health stigma were less inclined to have their children associate with those whom they know have a mental illness. These findings are significant in that they show how less exposure to mental illness perpetuates a cycle of ignorance, which can have negative consequences for children who rely on their parents to give them the support they need, including for their mental health.

Mental health stigma is an insidious, underlying presence within both the black and Latinx community. However, mental health stigma’s nature differs somewhat between black and Latinx communities in personal and perceived terms. In 2018, DeFreitas and colleagues surveyed about 200 black and Latinx college students in the United States in order to assess how their perceived stigma and personal stigma related to several of their personal qualities, including but not limited to: their anxiety about interacting with those with a mental illness, their beliefs on how much a mental illness disrupts one’s relationships, their beliefs on whether mental illness is treatable, and their perceptions on when (if ever) a person is to recover from a mental illness.

Ultimately, the researchers found that, for both black and Latinx students, having great anxiety about interacting with someone who has a mental illness was related to more perceived and personal stigma overall. However, black students had greater perceived and personal stigma than did their Latinx counterparts. The researchers inferred that this could be because previous research has found that black communities tend to associate all mental illnesses with a severe repercussion such as hospitalization (Matthews, Corrigan, Smith, & Aranda, 2006, as cited in DeFreitas et al., 2018).

Studying mental health stigma in black and Latinx students is not only essential because it has salient, distinct consequences in their respective communities, but also because there is evidence that mental health stigma is more prevalent among communities of color than it is among white communities in the United States (Corrigan & Watson, 2007; Mishra, Lucksted, Gioia, Barnett, & Barquet, 2009). Matthews and colleagues (2006, as cited in DeFreitas et al., 2018) found that black Americans were more likely than white Americans to feel embarrassed about having a mental illness or needing mental health treatment because they knew how negatively mental illness was perceived in their community. Furthermore, Jimenez and colleagues (2013) found that older Latinxs felt more shame about being diagnosed with a mental illness than did their older white American counterparts, in great part because these older Latinxs feared that having a mental illness would be disappointing to their family.

However, in spite of the evidence that communities of color have more mental health stigma than do white communities, some research shows exactly the opposite or, at the very least, some noteworthy qualifications. For example, Givens and colleagues (2007) assessed that white Americans in their sample had more mental health stigma than did black Americans in their sample. But the researchers did note that 90% of those sampled had some prior experience

with mental health treatment, thus making this sample not entirely representative of the general United States population. In addition, Nadeem and colleagues (2007), who studied Latina and black women of low socioeconomic status in the United States, found that only the Latina and black women who were immigrants had more mental health stigma than did their white women counterparts. The United States-born black and Latina women had lower levels of mental health stigma than did their United States-born white counterparts. Overall, it appears that study methods and context are relevant to findings on stigma in communities of color. For this reason, it is imperative to continue to research communities of color so that destigmatizing interventions can be personalized and made more relevant to each group in question. Targeting stigma must be an individualized process, where one is conscious of how to “speak the language” (in a metaphorical or perhaps even in a literal sense) of a community. Otherwise, one can never properly address the more ideological reasons that prevent help-seeking behaviors and encourage discrimination.

It is also important that counselors and teachers in the school setting are aware of how mental health stigma generally exists in black and Latinx communities. In this way, counselors and teachers will know how to best demonstrate to their students of color that they will not be stigmatized during their treatment or intervention. However, counselors and teachers must also be aware of skills they can use to assess their black and Latinx students’ individual views on mental health because general trends in black and Latinx communities do not mean that all black students are homogenous and all Latinx students are homogenous. To assume this would be to undermine the unique eccentricities of each individual student. Studies have shown that if people of color feel that their relationship with a mental health professional is healthy and respectful of

their own personal and cultural beliefs, they will continue to seek out resources, and intervention will be four times more effective (Griner & Smith, 2006).

Añez and colleagues (2008) acknowledged that, while Latinx adults are diverse in their beliefs, there are three major Latinx cultural values that mental health counselors should always evaluate at the beginning of treatment: *personalismo* (a genuine sense of friendliness), *confianza* (confidence and trust in an individual's relationships) and *respeto* (respect). For instance, because *personalismo* involves the reluctance to express disagreement (Antshel, 2002; Falicov, 2008, as cited in Añez, Silva, Paris, & Bedregal, 2008), a counselor can interact with a Latinx client in such a way that is less confrontational or direct. The counselor could say (in Spanish or English, depending on the client's preference): "What allows you to feel comfortable when you are getting acquainted with a doctor?" (Añez et al., 2008). *Respeto* can be assessed and established when a counselor asks the client how they wish to be called: Mister, Missus, Miss, *Señor*, *Señora*, or *Señorita* (Añez et al., 2008). In such a way, the power dynamic of the counselor—client relationship can be somewhat more balanced. Initially, a Latinx client could be intimidated by their counselor because of their professional position, and a Latinx client could be even more intimidated if their counselor is white. However, if the Latinx client feels that they are being respected and called by a certain title, they could feel more welcome to express their own opinions and concerns with the professional. Lastly, a professional can establish *confianza* by indirectly suggesting how conversations will be kept confidential or by asking a question (again, in Spanish or English) such as: "How does someone develop *confianza* with you?" (Añez et al., 2008).

With all of these examples, the mental health counselor gives the Latinx client an opportunity to assert their autonomy and offer their input on what will make the treatment more

effective. The counselor must respect and adhere to these insights and adapt their treatment style to the client's liking so that cultural values are never broached and so that mental health stigma is never created. This sort of approach can certainly be applied to any culturally competent school counselor or teacher and their student. If a school counselor or teacher establishes a culturally and personally sensitive rapport with their student early on, the student will be better able to confide in them, and the counselor or teacher can in turn provide better assistance.

Bains and colleagues' (2014) study attests to how *personalismo*, *respeto*, and *confianza* can also relate to effective mental health treatment of black and Latinx students who go to school-based mental health centers (also known as SBHCs): facilities that aim to provide physical and mental health resources for underprivileged communities, particularly minority adolescents (Walker, Kerns, Lyon, Burns, & Cosgrove, 2009). Bains and colleagues' (2014) study was a follow-up on the study released by the Connecticut Association of School Based Health Centers (2012, as cited in Bains et al., 2014). In the original study, the researchers interviewed black and Latinx male students from various middle schools and high schools in Connecticut about their experiences with their SBHCs. The students expressed how trust and confidentiality were the most important things a counselor could offer them and that those things were provided by their SBHC counselors. Bains and colleagues (2014) reassessed the interview responses and found that their counselors all demonstrated that they were always willing to talk with their students, listen to their students, help their students through a difficult situation, and try to understand what their students were going through without judgment. As one student in Bains and colleagues' (2014) said, having counselors who practiced cultural sensitivity "allows you to open up to them and like it's a lot more comfortable talking to them" (p. 416). This student expressed the very reason why cultural sensitivity is vital: it alleviates the anxiety of a

power imbalance between a professional and a client – a client who, in this case, is a susceptible, vulnerable adolescent seeking guidance from a more experienced adult.

These results are encouraging because, while SBHCs are not offered in every public-school system, they aim to serve students of color and have previously been shown to be particularly effective for male students of color (Juszcak & Ammerman, 2011, as cited in Bains et al., 2014), who are on average less likely to search for and receive mental health resources than are white male students (Bains et al., 2014). This means that SBHCs are consistently offering suitable services to students of color and that the SBHC format should be considered in all schools.

Interestingly, Bains and colleagues (2014) found that when the SBHC counselors simply expressed confidentiality and trust, their students of color did not feel that the ethnicity of their counselor affected their level of comfort. All that really seemed to be significant to the students was that their counselor seemed genuinely interested in what they as students had to say. This seems initially to contradict the findings of some researchers like Cokley and colleagues (2004). The researchers in Cokley and colleagues' (2004) study found that, from a sample of white, black, and Latinx college students, students of color were more likely than their white peers to say that they have had fewer close and respectful interactions with their professors. The researchers concluded these findings could have resulted from there being fewer professors of color on campus to whom students of color could relate. Consequently, the students of color in this sample could have been feeling the sort of loneliness that is often seen from students of color on predominantly white college campuses, as per Gloria and Robinson-Kurpius (1996, as cited in Cokley et al., 2004).

However, because of the findings from Bains and colleagues (2014), I propose that these students of color from the study of Cokley and colleagues (2004) felt less close to their professors not necessarily because their professors were white but rather because their professors were not equipped with the multicultural knowledge and sensitivity that the counselors from the sample of Bains and colleagues (2014) had. This is not to say that these black and Latinx students could not have benefitted from having faculty of color on their campus. They most certainly could have, and faculties on all campuses should be diverse just as the student body is diverse. However, because of the findings from Bains and colleagues (2014), it is possible that, if the faculty (regardless of ethnicity) in Cokley and colleagues' (2004) study had been more multiculturally aware and sensitive, they would have been better able to meet their black and Latinx students' mental health and academic needs.

My proposal can be further substantiated because of the promising findings from Cokley and colleagues' (2006) follow-up study of their original 2004 study. In their 2006 study, the researchers found that black college students who found their professors to be approachable and have a caring attitude were more likely to have better GPAs. This finding was quite salient because the researchers also found that white college students who found their professors to be approachable and have a caring attitude were not more likely to have better or worse GPAs. These results suggest that the way that black students in particular perceive their educators is critical to their academic performance and overall educational experience. The researchers concluded that professors should be aware that some of their students may be intimidated by them because of their background and academic qualifications. However, if the professors are willing to break down the wall of perceived superiority and "take the time to get to know all their students, regardless of their backgrounds" (p. 65), they will find that their students (especially,

perhaps, their black students) will have better grades and be more fulfilled in their academic environment. These findings are congruent with Bains and colleagues' (2014) findings that educators of all ethnicities who demonstrate multicultural sensitivity and openness to their students of color can vastly improve their lives.

Ultimately, this is the power of multicultural sensitivity in a classroom or school mental health facility. A school environment that believes in a multiculturalist philosophy and encourages all counselors and teachers to sympathize with their students will bring about vast improvements in black and Latinx students' mental health and desire to learn. In a school where counselors and teachers embody multicultural awareness, students' experiences – regardless of their ethnicity – are not presupposed or judged. They are simply interpreted as human experiences, and the counselor or teacher caters the advice to what the student actually needs, rather than to what the counselor's or teacher's implicit bias interprets them to need. As such, black and Latinx students can be given the justice and service they deserve, even if counselors and teachers of color are scarce. While a white counselor or teacher, for example, cannot always substitute knowledge of experience with actual lived experience (particularly experiences of racism), they can at least offer the sort of sympathy that is required for black and Latinx students to feel encouraged to ask for help when they need it. In the current United States education system, where counselors and teachers of color are not yet given the representation that they deserve and need, it is all the more important, in the meantime, for the vast majority of white counselors and teachers to practice multicultural sensitivity.

Given this evidence and Fripp and Carlson's (2017) observation, the realities of mental health stigma in black and Latinx communities cannot be ignored if schools are to provide equal help for all of their students. Without considering the ideologies of students of color, the

disparities of mental health resource usage among various ethnic groups will remain. According to the National Alliance on Mental Illness (2004, as cited in Fripp & Carlson, 2017), it is white, middle class Americans who seek out mental health resources the most and black Americans who seek out mental health resources the least. While this could be due to various factors, including lack of insurance and misdiagnosis, it could also be because of stigma and the fear of being culturally misunderstood by a mental health provider (Fripp & Carlson, 2017). Because of this, school systems have a responsibility to begin to break the cycle of stigma in their students while they are still young and developing. Counselors and teachers can demonstrate multicultural sensitivity in a classroom or in a school mental health facility by offering multiculturally sensitive mental health resources and an unassuming lending ear. They can then identify and adjust their black and Latinx students' mental health symptoms as soon as possible so that they can grow into mentally healthy adults. In turn, these mentally healthy adults can help break the stigma in their own communities and encourage others in their communities to pursue mental health resources, if they are able. Ultimately, it is effective to try to break the systemic issue of stigma within a black or Latinx person while they are still developing their worldviews and identity.

2.5: School

Currently in the United States, are counselors and teachers prepared to serve the mental health needs of their black and Latinx students? The short answer is: not especially, and this may be in part because the teacher racial demographics are not at all proportional to the student racial demographics in public-schools. According to the 2018 report from the National Center for Education Statistics, the majority of public-school teachers are white women. In fact, 75% of

public-school teachers have been white women between the 2011-2012 and 2015-2016 school years. However, the breakdown of race across genders is slightly different within this timeframe. In the 2011-2012 school year, about 88% of all teachers were white. In the 2015-2016 school year, about 80% of all teachers were white. This is an improvement, but it still is not even close to representing the student body found in public-schools. Among the public-school students in 2015, 48.9% were white, 25.9% were Latinx, 15.4% were black, 5.3% were Asian/Pacific Islander, 3.4% were biracial, and 1% were American Indian/Alaska Native. Latinx student populations are growing the most in public-schools, with a 12.4% increase in representation between the years 1995 and 2015. White student populations have been steadily decreasing, with a 15.9% decrease in representation between the years 1995 and 2015. Within this same 20-year span, the black student population has fluctuated between 15.4% representation and 17.2% representation. Meanwhile, between the 2011-2012 school year and the 2015-2016 school year, there has only been a 3.1% increase in black teachers and 3.5% increase of Latinx teachers (Snyder, 2018).

Unfortunately, this demographic disparity has always been an infamous fact in United States education (Sleeter, 2001). To make matters worse, even though the majority of white teachers know that they will be working with culturally diverse students, they usually do not have much cross-cultural experience or knowledge (Barry & Lechner, 1995; Gilbert, 1995; Larke, 1990; Law & Lane, 1987; McIntyre, 1997; Schultz, Neyhart, & Reck, 1996; R. Smith, Moallem, & Sherrill, 1997; Su, 1996, 1997; Valli, 1995, as cited in Sleeter, 2001). According to Schultz and colleagues (1996, as cited in Sleeter, 2001), white teachers in training believe the stereotype that children from urban backgrounds are more likely to cause a distraction in the classroom. Furthermore, white teachers in training are more likely to use colorblind policies that

do not recognize multiculturalism (McIntyre, 1997; Valli, 1995, as cited in Sleeter, 2001), and they often do not understand how to apply multiculturalism in a classroom (Goodwin, 1994, as cited in Sleeter, 2001).

This teacher—student demographic disparity and lack of multicultural understanding among teachers are striking facts in and of themselves, but especially when one considers the repercussion that this must have on students of color. Research repeatedly shows that a school environment has a significant effect on students' mental health. Therefore, if a black or Latinx student exists in an environment that is not equipped to address their needs, their mental health is compromised. Given the societal, racially-charged factors that can negatively affect black and Latinx students, as described previously in this chapter, I argue that when school systems neglect the mental health of black and Latinx students, they contribute to institutional prejudice and the perpetual marginalization of people of color.

According to the National Longitudinal Study of Adolescent Health (Blum & Rinehart, 1997), school environment makes a significant impact on students' mental health. The researchers examined students on several measures of school environment that might affect students' mental health: school connectedness (the degree to which a student feels close to peers and teachers and the degree to which a student feels that they are being treated fairly by teachers), student prejudice (the degree to which the students at a school are prejudiced), student attendance, parent—teacher organization (the degree to which parents pay dues to a school), student dropout rate, school type (public or private), teacher education (how many teachers have Master's degrees), and college (the number of students set to go to college). Of all these variables, the researchers found that two have the most pronounced effect on students' mental health: school closeness and student prejudice. When students feel that they are treated fairly in

school, are close to their teachers, and are close to their peers, they are less likely to experience emotional discomfort or thoughts of suicide. Furthermore, when students feel more connected with their school, they are somewhat less likely to display violent behavior, use marijuana and cigarettes, and engage in early sex. It can be concluded, therefore, that counselors and teachers have a responsibility to encourage an atmosphere of closeness and respect in a school. In this way, black and Latinx students in particular will experience the attention to their mental health that they deserve.

As Bains and colleagues (2014) showed, when their sample of SBHC counselors demonstrated multicultural sensitivity, black and Latino male students felt more comfortable around their counselors and were more likely to continue to utilize the mental health resources they provided. This is significant in terms of a healthy school atmosphere because these counselors allowed students of color to feel that they were cared for and able to “function to the best of their abilities” (p. 416). Indeed, the counselors’ tactics from Bains and colleagues’ (2014) study correlated with their black and Latino male students’ increase in GPA and decrease in school absences. The students in the study were consciously aware of this fact and attributed their success directly to their counselors. Furthermore, because of the counselors’ input, the students were better able to cope with emotionally taxing situations at school and in their lives. One student in the study said, “[My counselor] talks to me about, like staying a better person. She always helps me stay out of trouble. I’m now respectful and mature now in situations” (p. 416). Many of the students also attested to how their newfound skills improved their relationships with their own family because they were able to actually have conversations with their parents rather than argue with their parents. Improved communication skills with family members are undoubtedly useful, especially when one considers the effect that family

relationships has on black and Latinx students (see section 2.3 for reference). Overall, it is because these counselors from the SBHC created a comfortable, relatable atmosphere for these black and Latinx students that they were able to see real improvements in their grades, relationships, and mental health.

In Gonzalez's and Padilla's (1997) study on Mexican American high school students (see sections 2.2 and 2.3 for reference), cultural pride and familism were not the only significant factors toward academic resilience. In fact, of all the variables studied – sense of belonging to a school, loyalty to culture, and a supportive academic atmosphere – the sense of belonging to a school and a supportive academic atmosphere were the most significant factors that positively affected academic resilience. For improved grades specifically, regression analysis showed that sense of belonging to a school was the only variable of importance ($R^2 = 19.78\%$). Similarly, in 1991, Alva showed that Mexican American students' sense of belonging to their school contributed to their interest in school. Also, in 1992, Goodenow (as cited in Gonzalez & Padilla, 1997) showed that Mexican American students' sense of belonging to their school contributed positively to their expectations of their own academic achievement.

Past studies have shown that college students, also, benefit the most academically when they have close relationships with the faculty on their campus and when they perceive that faculty members genuinely care for them. College students who indicate that they have a close relationship with at least one member of the faculty on their campus are happier with their college experience and are more driven to achieve in their education and career (Rosenthal et al., 2005). Furthermore, when college students believe that faculty members are accessible, encouraging, and caring, they are less likely to dislike their college experience and more likely to remain in school (Woodside, Wong, & Dudley, 1999, as cited in Cokley et al., 2004). Indeed,

college students are aware of how good relationships with faculty members are conducive to better mental health and performance. Fox and Schaefer (1995, as cited in Cokley et al., 2004) and Schaefer and Schaefer (1993, as cited in Cokley et al., 2004) have discussed how college students describe a positive college experience as being one where faculty respect their students as individuals and intellectuals and are open to helping their students outside of class.

Counselors and teachers can also respond to their black and Latinx students' symptoms of trauma in order to foster a safe and caring school community. Considering how black and Latinx students often experience extreme anxiety and trauma due to cultural or immigrational factors, it is useful for counselors and teachers to focus their efforts on providing these students with the therapy they need – especially when it is possible that these students do not have the means to seek such therapy outside of school. For example, Kataoka and colleagues (2003) studied eight group cognitive behavioral therapy (CBT) sessions on a total of 157 students in grades 3 through 8 in Los Angeles who identified as Latinx and who displayed symptoms of depression or PTSD as a result of immigration and community violence. These sessions were conducted in Spanish by bilingual social workers. The researchers concluded that the participating students experienced modest decreases in their PTSD and depression symptoms. Interestingly, group therapy has been shown in the literature to be especially effective for Latinx individuals (Garrison, Roy, & Azar, 1999). Group therapy seems to be useful for Latinx children because it gives them the confidence to express themselves better in English, and it encourages them to be proud of their Latinx culture and values (Padilla, 1981, as cited in Garrison et al., 1999). McMullen and colleagues (2013) also found that cognitive behavioral therapy in a group setting was significantly effective in reducing symptoms of PTSD for black boys ages 13 to 17 who were either boy soldiers or traumatized by war in the Democratic Republic of Congo. The

authors noted that working as a group was especially useful for these boys because it promoted respect and lessened the chances of stigmatization. Overall, all of these results suggest that if group intervention techniques for black and Latinx students are utilized in schools, black and Latinx students will gain the skills to better cope with their emotional distress.

From all of these studies cited in this section, it is clear that counselors and teachers can make a tremendous impact on the lives of black and Latinx students – for better or for worse. If counselors and teachers are ignorant of multiculturalist philosophies, do not foster an environment of acceptance, and do not address trauma or emotional distress in their black and Latinx students (either through individual or group counseling), they are doing a profound disservice to their black and Latinx students. As a result, they contribute to the continued suppression of black and Latinx voices that is so ingrained systematically in American culture, and they fail to deliver the very care and guidance that is essential in their line of work. If, on the other hand, counselors and teachers learn about multiculturalism and make a concerted effort to include their black and Latinx students and speak to them in a way that resonates with their black and Latinx cultures, not only do they help change lives; they also help change culture. According to Moll and González (1997), “the most basic of pedagogical principles is for teachers to build on the experiences and abilities that students bring to class” (p. 89). This means that educators (and, by expansion, school counselors) must not see their diverse students’ various cultures and ways of life as a hindrance but as an opportunity. By understanding their black and Latinx students’ experiences and intervening in a multiculturally competent fashion, counselors and teachers in school systems can transform a school system into a more accepting, respectful, and equitable place where differences are celebrated and where justice is enforced.

2.6: A Summary and Further Considerations

Thus far, I have made two arguments. First, black and Latinx students' mental health is impacted by their unique demographic issues and stressors, ethnic identity, relationship with family, cultural stigma, and school environment. Second, counselors and teachers that work through a multicultural philosophy can recognize these factors that affect their black and Latinx students' mental health and then can create a healthy school environment that will improve the mental health of their black and Latinx students.

Through a multiculturalist philosophy, counselors and teachers allow their black and Latinx students to feel more comfortable around their counselors and teachers (Bains et al., 2014), to see themselves represented in their education (Moll and González, 1997), and to demonstrate greater emotional, social, and academic success (Castro-Olivo et al., 2016). Counselors and teachers can display multicultural sensitivity to their black and Latinx students first and foremost by being aware of the various factors that may have significant effects on them. Counselors and teachers can learn and understand:

1. How black and Latinx individuals are disproportionately more likely to experience poorer quality healthcare than their white counterparts and are also disproportionately less likely to have adequate healthcare coverage than their white counterparts (Artiga et al., 2018);
2. How black and Latinx adolescents are more likely than their white peers to experience disruptive mental health conditions (Department of Health and Human Services, 2001; Office of Minority Health, 2014, as cited in Voisin et al., 2016; Ozer, et al., 2003, as cited in Garcia et al., 2008);

3. How greater ethnic identity corresponds to better mental wellbeing and grades among black and Latinx individuals (Cokley & Chapman, 2008; Gonzalez & Padilla, 1997; Mandara et al., 2009);
4. How black and Latinx students' familism values (Gaines et al., 1997) translate to their better mental health if they have healthy, close relationships with their family members (Brakefield et al., 2012; Conger et al., 2002; Elkington et al., 2011; Garcia et al., 2008; Hammock et al., 2004; Voisin et al., 2016);
5. How mental health stigma is particularly salient in black and Latinx communities and therefore hinders black and Latinx individuals from seeking out mental health treatment or talking about their mental health concerns (DeFreitas et al., 2018; Fripp & Carlson, 2017; Villatoro, DuPont-Reyes, Phelan, Painter, & Link, 2018); and
6. How black and Latinx students' mental health fairs far better if they feel connected to their school environment and to their peers (Baines et al., 2014; Blum & Rinehart, 1997; Fox & Schaefer, 1995, as cited in Cokley et al., 2004; Rosenthal et al., 2000; Schaefer & Schaefer, 1993, as cited in Cokley et al., 2004).

It is equally important, however, that counselors and teachers display multicultural sensitivity by actively communicating with their black and Latinx students and advocating for their mental health in ways that resonate with them culturally and individually. Counselors and teachers can ensure their black and Latinx students that they are trustworthy and that anything disclosed to them will be kept confidential (Bains et al., 2014). They can also express to their black and Latinx students that they are heard and cared for as individuals (Bains et al., 2014). They can readily enforce and promote an atmosphere of friendship and comradery in the classroom so that black and Latinx students feel connected to their school and with their peers

(Blum & Rinehart, 1997). They can assess their black and Latinx students' degree of ethnic identity and encourage them to see their ethnicity in a positive way (Cokley & Chapman, 2008). Lastly, when intervening on behalf of a black or Latinx student, they can appeal to their students' values that resonate with their culture; for example, they may exhibit qualities of *personalismo*, *confianza*, and *respeto* for their Latinx students (Añez et al., 2008).

Without a doubt, counselors and teachers play a significant role in black and Latinx adolescents' current wellbeing and emotional adjustment later in adult life. By using any and all of these multiculturally sensitive methods summarized above, counselors and teachers aim for their black and Latinx students to feel that their personhood is valued and that their mental health concerns are destigmatized in their school. In doing so, counselors and teachers will combat the mental health stigma that confounds American culture generally and black and Latinx cultures especially. They will also create a more equitable system in American society because they are offering their black and Latinx students the same dignity, attention, and care that they offer their white students.

While my literature review has covered what I consider to be some of the most noteworthy findings on and interventions for black and Latinx adolescent mental health, there are two other relevant pieces in the literature worth addressing because they pertain to the future of what better school-based mental health interventions for black and Latinx adolescents could look like.

First, many researchers have argued that school systems in general are idyllic places to instill social—emotional resiliency in students (Durlak, Weissberg, Dymnicki, Taylor, & Schellinger, 2011; Jones, Brown, & Aber, 2011; Zins, Weissberg, Wang, & Wahlberg, 2004, as cited in Castro-Olivo, Cramer, & Garcia, 2016). Social—emotional resiliency, as defined by

Merrell (2010) is a state whereby an individual has emotional and social competence, positive peer relationships, coping abilities, a positive self-concept, and empathy. When students demonstrate social—emotional resiliency, they are also less likely to abuse alcohol and drugs, practice truancy, and receive poor grades (Ali, Dyer, Vanner, & Lopez, 2010; Durlak et al., 2011; Najaka, Gottfredson, & Wilson, 2001). For these reasons, school systems have striven to create programs and manuals that will help teachers to design curricula and learning activities that directly aim to foster students' social—emotional resiliency (Castro-Olivo et al., 2016). Indeed, research has shown that teachers who implement ideas from manual-based programs have had great success in increasing their students' social—emotional resiliency (Durlak et al., 2011; Merrell, 2010). However, the current literature that shows the effectiveness of well-governed social—emotional interventions in school settings has mostly focused on white students or student populations. Consequently, more research must be done to see how social—emotional resiliency interventions have worked for students from ethnically diverse, at-risk populations, which arguably are the most in need of more social—emotional guidance (Castro-Olivo et al., 2016).

Granted, the little research on the effects of social—emotional interventions on students of color has provided favorable results. Indeed, SBHCs (see Bains et al., 2014, and Walker et al., 2009) appear to have a system in place that is most aligned with social—emotional interventions. Sullivan and Simonson (2015) even released a meta-analysis on how social—emotional interventions have been effective for students of color who are refugees. Even so, there is a great need for more researchers to evaluate specifically how social—emotional intervention programs can be made to benefit black and Latinx students and be culturally relevant to black and Latinx

students – particularly those for whom English is not their first language (Castro-Olivo et al., 2016).

Second, school counselors who use consultation techniques with their students may have a better chance at improving their black and Latinx students' academic achievement and emotional state. School consultation, as defined by Erchul and Sheridan (2014, as cited in Newell, 2016), is a practice that involves a mental health specialist and staff member working to improve the academic accomplishments and emotional state of their student. So far, researchers have found that consultation is effective in cultivating students' wellbeing (Newell, 2016), but schools too often focus on assessment rather than consultation (Castillo, Curtis, Chappel, & Cunningham, 2011, as cited in Newell, 2016). According to Newell (2016), this is perhaps a main reason why American schools have failed to close the academic achievement gap between white students and students of color. It is possible that if counselors utilize more consultation practices (perhaps similar to those described by Bains et al., 2014), black and Latinx students could feel more confident in their school environment and could exhibit vast improvements in their academic performance and mental health. However, the research on the benefits of school-based consultation practices, predictably, have focused primarily on white students. As a result, researchers do not know how consultation strategies can be applied to or adjusted for black and Latinx students. While there have been some efforts to create a form of multicultural consultation known as "social justice consultation," as originally coined by Behring and Ingraham in the late 1990s (as cited in Newell, 2016), school-based consultation practices for black and Latinx students have yet to be sufficiently studied and crafted into a comprehensive theory (Newell, 2016).

2.7: Gaps in the Literature

Great strides have been made in the examination of mental health in black and Latinx students in the United States. However, there are three points of concern that have yet to be addressed at length in the literature.

I. How counselors and teachers recognize specific mental health issues of black and Latinx students. As I have demonstrated in the literature review, even though there is useful literature on the negative mental health experiences of black and Latinx students, this does not necessarily mean that counselors and teachers are equipped to identify such negative experiences. This also does not necessarily mean that counselors and teachers are even aware of the common negative mental health experiences that black and Latinx students encounter. Undoubtedly, lack of knowledge of the matter can do a great disservice to black and Latinx students, and more research needs to assess how knowledgeable counselors and teachers are about the specific mental health issues of black and Latinx students and how counselors and teachers can recognize symptoms of poor mental health in their black and Latinx students.

II. The counselor and teacher perspective on their black and Latinx students' mental health and how counselors and teachers can access resources to help their black and Latinx students. Even if a great number of counselors and teachers are ill-prepared to identify the mental health issues of black and Latinx students, this is not to say that there are not some counselors and teachers who have been trained to be multiculturally aware and proactive in serving their black and Latinx students' best interest. However, even while such counselors and teachers exist, they still are at the mercy of their school environment, which may or may not have the culturally relevant school curriculum or the culturally relevant mental health resources that would be most useful for black and Latinx students. As a result, multiculturally competent counselors and

teachers must be knowledgeable on how to counter the potential downfalls of their school system and find creative, manageable ways to demonstrate multicultural awareness and sensitivity in their own workspace. But to what extent are such counselors and teachers truly multiculturally aware? To what extent do they know how to assist their black and Latinx students, particularly in an environment that may not provide them with the tools to do so?

III. *Qualitative studies on mental health.* As Fripp and Carlson (2017) mentioned, more qualitative methods on issues surrounding mental health for people of color will be useful in order “to understand specific attitudes that people of color hold related to mental health and to explore the unique relationship that those attitudes share with stigma” (p. 90). In turn, by focusing on the intricate ways that attitudes and stigma interact for people of color, recruitment and retention devices will be more effective because they will be based on a deeper understanding of the issues at hand.

2.8: Purpose of the Study and General Methods

This study aims to fill in the gaps in the current literature in several ways. First, it uses qualitative methods that document the much-needed perspectives of counselors and teachers on their black and Latinx students’ mental health. Second, it purposefully selects the perspectives of counselors and teachers from a charter high school in Texas that serves economically underprivileged students who are mostly Latinx, yet more so black than white. With this specific sample of counselors and teachers, the study shows examples of multiculturalism in a school system in action – an aberration from the national norm. It also provides insight from counselors and teachers who understand the importance of addressing the mental health needs of their black and Latinx students and have methods of ensuring the stability of the mental health of their black

and Latinx students. Ultimately, then, this means that their responses can serve as inspiration for other counselors and teachers who work in white-dominated schools and who seek to find ways to help their black and Latinx students' mental health.

In my study, I utilized a theoretical lens known as the interpretivist paradigm. As described by Crotty (2015) and Ponterotto (2010), this paradigm is a "semi-structured protocol" with a short number of interview questions, about 10 participants, and a goal of being "discovery-oriented" in nature (Ponterotto, 2010, p. 582). Essentially, the researcher has a short number of prepared research questions, but she also adds and revises questions during the interview process based on the patterns that naturally emerge in her research and in the responses of her participants. The relationship between the researcher and participant is consequently professional but also interactive and conversational in nature. They both try to explore the answers to important questions together. Furthermore, in this paradigm, the interviewer alone analyzes the data and accepts that there is no single conclusion that must be agreed upon by a team of researchers. This particular method respects the nature of qualitative research in that it cannot be so rigid, for complicated phenomena in life are often not at all rigid. Along with this paradigm, I utilized grounded theory, which often in qualitative research is paired with the interpretivist paradigm. In grounded theory, the researcher conducts in-depth, alterable interviews that are in person and are commonly at least an hour in duration. Furthermore, the interviewing process, transcribing process, and analysis process happen concurrently so that, as with the interpretivist paradigm advocates, "discovery" occurs naturally.

Using the interpretivist paradigm and grounded theory, I interviewed counselors and teachers in order to develop an understanding of the following: how counselors and teachers perceive their black and Latinx students' mental health, how counselors and teachers personally

experience the effects of their black and Latinx students' mental health, how counselors and teachers generally are prepared (or not) to address their black and Latinx students' mental health, and what counselors and teachers think school systems and other professionals can do to better the mental health of black and Latinx students. Three key research questions will be answered in order to develop an understanding of these concerns:

1. How do counselors and teachers see their black and Latinx students handling their mental health?
2. How do counselors and teachers manage black and Latinx students' mental health?
3. What (if anything) prepared counselors and teachers to manage black and Latinx students' mental health?

Chapter 3:

Methods and Procedures

Data Collection and Research Site

After reading through the current literature on United States school systems' approaches to black and Latinx students, as well as black and Latinx students' mental health and experiences, I established a list of 13 initial questions that would serve to answer my three main research questions. All questions were asked by me and in English.

1. How many years have you been a counselor and/or teacher?
2. How do your black and Latinx students approach you when they experience stress?
 - a. What other types of mental health concerns do they address with you?
 - b. Describe what students approach you.
 - c. What about white students? Do they approach you as well?
3. What sorts of differences do you see between your white students' experience with mental health and your black and Latinx students' experience with mental health? Why do you think they have different experiences?
4. How do your black and Latinx students react when under stress? Do their reactions differ from your white students' reactions?
5. How have your black and Latinx students talked with their peers (whether from the same culture or not) about mental health?
6. What does stigma against mental illness mean for your white students versus your black and Latinx students?
7. What types of mental health training have you had? What was that like, and have you utilized what you learned in your career?
 - a. What about culturally sensitive mental health training in particular?
8. How does culture affect mental health experiences for all of your students? Have you seen any major differences?
9. How do you reach out to your black and Latinx students to ask them about their mental health?

10. How does your approach on mental health with white students differ from your approach on mental health with your black and Latinx students?
11. How can school systems improve their outreach to black and Latinx students so that their mental health can be improved?
12. What mental health resources or tactics work and do not work with black and Latinx students? Are the resources or tactics for them different from those for white students?
13. How does language or your personal ethnicity play a role in black or Latinx students' willingness to discuss their mental health with you?

All participants interviewed were recruited from a Texas charter high school, hereby given the pseudonym Archibald Palin High School. The high school is part of a charter system that is renowned for its college preparatory curriculum. At this high school, 93% of the student population identifies as Latinx or Hispanic, 4% identifies as black, 3% identifies as white, and less than 1% identifies as Asian or some other race.

In order to begin my research, I first submitted my research proposal to the Institutional Review Board, which then designated my study as being exempt from review. I then contacted the principal and assistant principal from Archibald Palin High School in order to inform them of the purpose of my study and obtain consent to interview some of their employees. Once consent was obtained, I asked the principal and assistant principal for the email addresses of their counselors and teachers. I then wrote to each potential participant, informing them of the study and attaching a consent form for their perusal. A total of nine individuals (two counselors and seven teachers) agreed to participate in the study, and nine interviews were conducted.

In my email correspondence with each participant, I offered the option of interviewing either on-campus or off-campus. If a participant wished to be interviewed off-campus, I allowed them to choose a site of their choice that was quiet but public. Once I met with each participant

either on- or off-campus, I asked them if they had any additional questions about my study. Each participant then signed a consent form, which also designated whether they opted in or out of being audio recorded. Of the nine participants, only two chose not to be recorded. My shortest interview lasted 28 minutes, and my longest interview lasted 48 minutes. For each interview, I took handwritten notes and audio recorded the discussion if the participant consented to being audio recorded. While I was sure to ask all of the questions on my original list, I also ensured that I followed the interpretivist paradigm and grounded theory by making sure every interview was conversational in nature. I also adhered to the interpretivist paradigm and grounded theory by analyzing common themes in my data as I transcribed them from my audio recordings or notes. In this way, I was able to organically create new questions that would be used in later interviews that highlighted some of the additional themes provided by previous participants on how black and Latinx students fair with the rigor of their school curriculum and how black and Latinx students' families react to their stress. After I transcribed the audio recordings and notes, I did a final analysis of the common themes that arose in the interviews so that I could write a cohesive summary (see Chapter 4 for reference). If a theme was mentioned in at least four of the participants' answers, I considered it to be significant. I ultimately found five themes that adhered to this standard, so I color-coded each theme with its own unique color. This helped me keep track of important quotes and insights from participants on the relevant theme in question.

Once all of my interviews were transcribed and analyzed, I deleted the recordings from my audio recorder and stored my notes safely in a folder locked in a chest. In all of my notes, I used pseudonyms for the participants, in order to respect their confidentiality.

Participants

A total of nine participants were in this study. Seven participants were teachers and two participants were counselors. Five participants identified as women, and four participants identified as men. All four men identified as white. One woman identified as black, two women identified as Latina, and two women identified as white. All seven teachers only had experience teaching (not counseling), and both counselors only had experience counseling (not teaching). The participants had been counseling or teaching between three and nine years. Two of the participants have only worked for Archibald Palin High School. Four participants who had experience outside of Archibald Palin High School worked for other schools in Texas. The three remaining participants had previously worked in schools in New York, Louisiana, and California.

Chapter 4:

Results

The participants expressed similar sentiments around five themes that will be expanded upon in this section:

1. Knowledge of Black and Latinx Students' Stressors
2. Recognition of Signs of Stress
3. Observation of Mental Health Expression and Stigma
4. Belief in Relationship-Building and Promoting Social Justice
5. Recommendations for Less Homework, More Balance and Coping Skills

4.1: Knowledge of Black and Latinx Students' Stressors

The counselors in this sample had learned multiculturally sensitive mental health techniques from their counselor education programs. All of the teachers in this sample had mental health training from state-required in-service sessions administered by the counselors at Archibald Palin High School and at their previous institution (if applicable). While none of the teachers had explicit mental health training prior to these in-service sessions, their in-service sessions sufficiently helped learn how to identify common stressors among black and Latinx students. The knowledge they gained from these sessions was compounded by their own personal experiences with their black and Latinx students from Archibald Palin High School and, in some cases, at other institutions. Together, training and personal experience have helped foster the counselors' and teachers' value of multiculturalism in the classroom, as well as their understanding of the common problems that may need to be addressed among their black and Latinx students.

The counselors and teachers admitted that many of the stressors that their black and Latinx students experience may be considered “typical” for any adolescent. For instance, it is not uncommon for their black and Latinx students to approach them about concerns relating to their social and romantic relationships. Like other typical adolescents, black and Latinx students also feel stressed about studying for school and completing assignments. However, according to the counselors and teachers, the school stress that their black and Latinx students experience is atypical for most adolescents because they also often have to balance jobs with longer hours and care for their siblings while their parents work. These students often feel that, with their long school hours and their other more adult-like responsibilities, they are too exhausted to study effectively. According to Amy: “They have to either try and attempt to do as much homework as possible or they just can’t do homework because then they have to take care of siblings or whatever else, and then their grades suffer, and they get more stressed ... It’s a very vicious cycle.”

On top of this exhaustion, they often feel that striving for college is a futile pursuit because their society seems to enforce the idea that they do not belong politically or financially. Their families often struggle to make ends meet, and many of their students have turned to gangs just to find a community and cope. The Latinx students – many of whom are Mexican immigrants or from Mexican immigrant families – have also struggled with fears of being deported or being separated from their families. Sandy remarked that many of her students have tearfully expressed their worries that their parents will go to work and never come home again because of President Trump’s more stringent ICE policies. According to Jerry: “A lot of students [are] worried about their families. ... Towards the end of last spring when DACA was up in the air, that created a lot of inherent stress ... After the election, there was a palpable and just verbal

sense of unease, fear, anxiety.” This sense of “unease, fear, [and] anxiety” has made it difficult for Latinx students to function on a regular basis, and the counselors and teachers have sympathized with their students on a deeply emotional level. Josephine said:

“I would say, like, especially after the presidential election, it was definitely, like, tough for kids who are undocumented and feeling, like, afraid for themselves, for their families – afraid of ICE coming into their homes and separating them, right? Like, that causes a lot of anxiety. Like, how can I expect for you to focus in class with, like, those fears that you’re living with?”

Indeed, all of the counselors and teachers expressed with sadness that their Latinx students for the past few years have been primarily concerned about their families’ safety and wellbeing. Their great love for their family members at risk and their feelings of profound indebtedness to their families are constantly at the forefront of their stresses – above their own personal, daily problems and individual academic interests.

The financial and political strife that the black and Latinx students experience often make them resent not only their perceived lack of opportunity to achieve in school and college but also the concept of whiteness and the privilege that comes with it. In Jerry’s words:

“[When my students of color] talk about white people, they mean something specific. And it’s not a good thing. It’s not just someone who identifies as Caucasian. It’s someone who is politically right-leaning, anti-immigration, closed-minded ... Fitting of the president, I would think it’s kind of ... he has morphed into, like, kind of as a leader of the white community in a lot of my students’ eyes.”

The counselors and teachers know that their black and Latinx students are not ignorant about the fact that many of their barriers are ethnically charged. Since the election in particular, said the

counselors and teachers, the students have been hyper-aware of their own ethnic identity. They also have felt that white people generally are not to be trusted because white politicians – including and especially President Trump – seem to be entirely against them. With that said, however, the teachers who identified as white in the sample did not feel that their black and Latinx students feel resentful toward them, perhaps because white teachers at Archibald Palin High School express to their students that they are aware of their white privilege. Furthermore, the counselors and teachers believe that the black and Latinx students are still able to connect with their white peers for two reasons: first, their white peers are from a similar economic background and consequently can connect with them on that level; second, their white peers are not “under any delusion that their current reality is as precarious as are the Latinx students’,” said Jerry.

4.2: Recognition of Signs of Stress

The counselors and teachers have been trained by in-service sessions to recognize signs of stress in their black and Latinx students. However, they also have had plenty of experience with black and Latinx students to recognize when they are under duress. All of the counselors and teachers reported “shutting down” as a common symptom. In other words, said Bridget: “It’s like heads coming down, hoods coming up, not wanting to lift head, not wanting to talk, not really responding to those questions, or if they are responding, it’s kind of just like shrugs or ‘I don’t know’s.’” It is also common for these students to cry. However, the counselors and teachers acknowledge that there are predictable patterns in how openly their black and Latinx students have expressed their emotions – depending on gender and school location.

The counselors and teachers acknowledged that their female black and Latinx students at Archibald Palin High School and at other institutions have generally been more comfortable about crying in front of their peers. However, the teachers who had previously taught at other institutions also admitted that black and Latinx students – regardless of gender – were more hesitant, in comparison to their white counterparts, to be emotional in front of their peers in general. Amy said that her previous black and Latinx students may have appeared visually upset, but they never would have cried in front of their peers if they could help it. She added: “It was very much a, ‘I need to be strong and save face.’” Jerry said a similar sentiment. At his previous institution, black and Latinx students might have even been called derogatory names by other black and Latinx students if they had been seen crying in public.

But at Archibald Palin High School, the expression of emotion among black and Latinx students is somewhat different. Black and Latinx students of both genders are more likely to express their emotions in front of their peers. Even though the male black and Latinx students are somewhat less likely than their female black and Latinx peers to cry, they are still more likely than their male black and Latinx counterparts at other institutions to cry. The teachers in this sample all assented that, at Archibald Palin High School but not at their previous institutions (if applicable), students are not ridiculed if they cry in front of one another. Instead, they are met with advice and comfort from their peers and teachers. It is for this reason, the teachers believe, that the black and Latinx students at Archibald Palin High School feel it is acceptable to be vulnerable. In Amy’s words: “[The students] actually want to help, which is really great.”

4.3: Observation of Mental Health Expression and Stigma

Even if black and Latinx students at Archibald Palin High School may be more inclined to cry, the counselors and teachers there know that these students have internalized mental health stigma because of their cultures' beliefs. A common complaint or admittance from black and Latinx students is that their parents do not believe them when they tell them that they are experiencing symptoms of depression and anxiety. According to Josephine, "[Their parents] just, like, kind of brush it away, like, 'No, you're – you don't have a reason to be sad.' Like, 'You don't have a reason to be depressed or have anxiety or any of these things. Like, you're too young to be going through that.'" Grace said that she knows full well how these sorts of views are indicative of fear or shame felt in many black and Latinx individuals if a member of their community is struggling with mental health issues. She continued by saying that, as a result of this fear or shame, many black and Latinx parents have told their children that they should not seek out mental health resources. The parents feel that there are other solutions that may be less invasive or medical in nature. Grace offered an example of something her black and Latinx students have told her: "They might say: 'My parents say they don't believe in mental health resources and that we should instead pray about it together as a family or go to church together as a family.'" According to Sandy, her black and Latinx students have also told her that their parents resist mental health resources as an option because of prior negative experiences with mental health professionals.

This trend of hesitation or outright refusal from black and Latinx parents is common at Archibald Palin High School, as well as other institutions. The counselors and teachers in this sample believe that these attitudes have caused their black and Latinx students at Archibald Palin High School and other institutions to not have the language to express specifically how they are

feeling or what they are feeling. Sandy said that she often has to deduce what her black and Latinx students are feeling by showing them a list of emotions, to which they respond with “yes” or “no.” She has also found that, with her black and Latinx students, it is easier to relate mental health conditions to somatic symptoms because black and Latinx students have perhaps grown up in a culture where only discussing physical problems is acceptable. Sandy added that, when she teaches her students about the science of mental health, her black and Latinx students respond to a more “down—top processing” approach, and her white students respond to a more “top—down” processing approach. In other words, white students can more quickly understand how the brain (the “top” or the ultimate source) is what is responsible for other physical symptoms in the body (the “bottom” or the secondary features). Meanwhile, black and Latinx students can more quickly understand how physical symptoms in the body can be caused by the brain. When Sandy helps her black and Latinx students articulate their feelings and when she approaches her black and Latinx students with the “bottom—top” approach, she has noticed that these black and Latinx students are much more forthright about their emotions. They just need the language to know what to say and the permission to say it.

The counselors and teachers all said that, while black and Latinx students at Archibald Palin High School may initially struggle with finding the way to express their emotions and mental health concerns, they become more comfortable over time because they are in a community that is open to discussions on mental health. Benjamin said that the counselors on campus are invaluable resources for guiding and helping black and Latinx students. They teach black and Latinx students the language they need to express their emotions, and they help destigmatize mental illness for them. They also have begun to implement mindfulness activities like meditation and yoga for their black and Latinx students, in accordance to their stress level.

Consequently, Benjamin, along with several other counselors and teachers, believe that schools in general could better assist their black and Latinx students by hiring more counselors who are specialized specifically in multiculturally aware mental health (and not just applying to colleges). Grace added that, at Archibald Palin High School, the counselors do their best to be in contact with their black and Latinx students' parents so that they too can receive mental health resources. According to Grace, this process is useful and worth implementing in other institutions because it helps the students' own healing process and fortifies their relationship with their parents.

Furthermore, in the classrooms at Archibald Palin High School, the teachers encourage their black and Latinx students to participate in the mindfulness activities in their homerooms as a group. In that way, the students can see that talking about mental health openly and addressing it openly is acceptable and safe in front of their peers and educators. According to Amy: "We're trying to create, like, a very positive culture around [mental health practices]. Not just a, 'Hey, here's this; do it if you want,' but, 'Hey, this is what we're doing because this is a normal thing that everybody needs and can be a good thing for everybody.'"

4.4: Belief in Relationship-Building and Promoting Social Justice

Without exception, the counselors and teachers said that Archibald Palin High School's faculty's greatest strength is their fostering of a safe, open community that emphasizes social justice and viewing black and Latinx students without judgment. The counselors and teachers practice restorative justice, whereby students who have broken a rule are not punished without explanation or mercy but instead are able to engage with a teacher and reflect on what they did wrong. In this way, according to Jerry, the faculty are able to "[acknowledge] and [respect] their [the students'] autonomy," and this is ultimately what any adolescent would want. Jerry

continued by saying that Archibald Palin High School has long ago moved away from the strict merit—demerit system because seeing an entire gym of black and Latinx students in detention shows “a clear display of mass incarceration ... We can’t replicate that system at large.” With this new restorative justice practice, Jerry said:

“I think it’s positive in that, you know, I don’t think [the] kids ... have an overarching structure saying that they’re, you know, ‘bad kids.’ Like, ... ‘you’re a kid that’s always in detention’ or ‘you’re a kid that’s always racking up demerits.’ I think [restorative justice has] allowed them to say: ‘I’m a good kid who’s made a shitty choice. I made a bunch of bad choices this week. But, you know, next week’s a new week.’”

Josephine also highlighted on this equity concern:

“I think the biggest thing that works is, like, treating them as humans and not, um – and not looking at them like, ‘Oh, it’s these poor kids. We have to help them.’ ... No, we have to empower them to help themselves. Otherwise, we’re just, like, feeding them into a system that is broken, right?”

In general, throughout the counselors’ and teachers’ practices at Archibald Palin High School, the act of listening to students and ensuring their students that they as educators can be trusted is vital. The teachers make a point of talking with each and every student one-on-one throughout the school year, according to Benjamin. In this way, the teachers can understand their students’ goals and their needs before potential problems and stresses may arise. These conversations usually begin like this, in Benjamin’s words: “So I would ask my students, ‘Is there a way I can, like, best support you in this class just so that I can be aware of that?’ And I have students say, ‘Hey, I work really well with this other student,’ or, like, ‘I get anxious or

something like that sometimes, and it's helpful for me to go do this when I am.'" The teachers then try to abide by their students' wishes as best they can. According to Amy:

"We definitely try to be supportive of them and, like, understanding. And we as their teachers try really hard if, for whatever reason, there's a circumstance or a barrier, um, in front of them where they can't do what they really want to do, or the choices that they have chosen for themselves at the moment, we try really hard to support them the best way we can."

The counselors and teachers demonstrate their trustworthiness to their black and Latinx students in two other important ways, according to Josephine. First, the counselors and teachers not only tell their students that they can disclose anything personal to them, but they also set an example for their students by being emotionally open in front of them. Josephine said: "I open up about those things that I've gone through so they know 'oh this is something that happens' and, like, they're more willing to share about it if they need someone to talk to." Second, the counselors and teachers consistently validate their students' experiences and emotions when they do express themselves. Josephine said: "I think the biggest and most important thing to say is, like, 'I hear you.'" Xavier expressed something comparable:

"A student should trust that I'm going to advocate on – I'm going to, like, take their side. I'm always going to support them and help them. And I think that establishing *that* balance of trust – not, 'If you tell me about this, I won't tell anyone' but 'Tell me about this; we're going to do something about it, and I'm gonna help you do something about it the entire time. I'm always gonna be here' is critical."

Ultimately, because of the counselors' and teachers' assurance to their black and Latinx students that they matter and that anything personal they disclose will be kept confidential, they feel

welcome in the school community. The black and Latinx students, in turn, feel galvanized to work hard in their community and help others in their community. Bridget emphasized this point: “If you don’t feel like you’re a part of the community, why would you feel like you have to do anything for that community you’re forced to be in?”

The counselors and teachers at Archibald Palin High School believe that their practices of community-building and relationship-building may be part of the reason why black and Latinx students there feel more willing to express their emotions to their counselors and teachers. To Xavier: “I think [the students] feel comfortable ... because there is an atmosphere of acceptance ... here. And I don’t think that’s an experience they would get necessarily in public schools.” To Jerry: “I think that building a relationship on mutual respect ... is certainly helpful and further conducive to having students being willing to open up to you.” For Xavier: “Especially because they’re young adults, they want respect – they want their space respected. They want to feel not like they’re equals but they want to feel like they’re given the respect due to someone who’s going to be an adult very soon.”

When asked about whether they think their ethnic identity has an effect on this relationship-building process with their black and Latinx students, the counselors and teachers said that the ethnicity of the educator can matter, but it is not a determining factor one way or another. Sandy said that a counselor or teacher is successful not because they are of a certain ethnicity or because they are bilingual; it is because they demonstrate “genuine, authentic listening.” Grace said that, in the end, the counselor or teacher must find a way to emotionally – not ethnically – connect with the student; in the end, “it’s all about conversations.” However, all of the counselors and teachers believed that school systems should strive to make their faculty more ethnically diverse so that black and Latinx can see more people who look like them and are

successful. Bridget said: “I don’t think [student success relies on] just ethnicity alone. But I definitely think that the more a school has different ethnicities, races, and religions, the most they can support all students because of how identity is so multilayered.” Xavier gave an account of his experience at a predominantly black school outside of Texas:

“[For] my African American students [at my last school], having a black man in the classroom who is successful and, like, very driven and incredibly, incredibly brilliant, gave them someone who acted as a model – like a very positively social model who related to them on a very fundamental level, like sociologically from the perspective of race, economically from the perspective of poverty, and from the perspective of culture – from being from [the same city] ... I definitely saw a lot more of my black male students feel far more comfortable talking to their black male teachers than they did with white teachers, male or female ... Oftentimes, like, it would be, like, in – in a close family member, rather than a mentor or teacher.”

By practicing restorative justice, creating a community that is open about mental health, listening to black and Latinx students’ emotions without judgment, and validating black and Latinx students’ experiences, counselors and teachers at Archibald Palin High School are fighting for social justice and multiculturalism in their classrooms. However, it is worth noting that the teachers in particular fight for social justice and multiculturalism in even more direct ways. For instance, the white teachers acknowledge their ethnic privilege because they do not want to make their black and Latinx students feel that they are the narrow-minded white people that they fear. They instead want to show that they are willing to learn about their black and Latinx students’ struggles and help them achieve their best potential. According to Benjamin, who identifies as white:

“I’m very self-conscious too about it as, like, a white teacher, like, mentor or authority figure as well, right? There’s so much complexity to that and that power dynamic ... If I’m not completely comfortable or I haven’t had, like, as many experiences interacting with a certain, like, identity, I’m going to need to be more intentional about remembering to, like, see the best and be positive, even if it’s something unfamiliar.”

Jerry, who also identifies as white, said: “I think I try to be culturally conscious in everything I teach ... You need to be conscious of your inherent biases and there are some things that, you know, I inherently won’t be able to understand on a visceral level.”

In addition, teachers of all ethnic backgrounds try to instill a sense of ethnic and social justice in all of their students. Josephine gave one particularly salient example:

“I can’t even remember [exactly] what [my student] said – but it was something like ‘[Look at] that white lady over there.’ Just, like, in a negative context. And then having to have a conversation, like, ‘That’s not how you speak to people. How would it feel like if I just said ‘that Hispanic kid’?’ Right? Like, sometimes I feel like 100% of the things they do are out of ignorance because they just don’t know any better, right? And then that’s our job to make sure that they do know so they can be better.”

Amy succinctly summarized this philosophy: “We have an amazing group of people. And we try really hard to, like, stand up for our kids and, like, educate them and support them in any way we can.”

4.5: Recommendations for Less Homework, More Balance and Coping Skills

Almost all of the teachers said that school systems, including Archibald Palin High School’s, should find a better balance for black and Latinx students’ academics, mental health,

and personal interests. According to Bridget, schools too often make the dreadful mistake of cutting their budget on counselors, only to increase their budget on standardized testing preparation:

“I think if a school or a state or a system was really serious about [helping black and Latinx students] they ... would need to make mental health support and training a priority equal to a grade or the amount of pressure we put on standardized testing. Because the more emphasis you put on standardized testing, the more emphasis you’re putting on anxiety for a lot of kids ... I think that [standardized test stress] affects all students, but I think that those students who are more vulnerable already are more affected by it. So, if you look at the data of how students who are lower class or students who are black or Hispanic or ... students who are already scoring lower on standardized tests, emphasizing standardized tests doesn’t actually improve those scores because you’re not really getting to the root cause of why those students are performing worse on those tests.”

In addition, many of the teachers believed that the long length of the school day at Archibald Palin High School and the intense route-to-college mentality – with ample homework and fierce encouragement to take multiple AP classes – is emotionally exhausting for some students. This is not to say that black and Latinx students should not be academically challenged; of course, they should, the counselors and teachers clarified. However, the reality is that not all students – regardless of ethnicity – are going to be high-achieving students. In addition, to force all of these students at Archibald Palin High School down one path and to put so much academic pressure on them when they already may have many other outside pressures is a bit extreme. Consequently, a curriculum that is incredibly anxiety-inducing for some students can

unfortunately lessen the benefits they could receive from the school's open and accepting community. In Paul's words:

"It's easy for some students to become disengaged and feel defeated. ... I've a lot of feelings about it. ... I used to lose sleep about it, to be honest ... We tell our students, 'You have to go to college, you have to go to college, you have to go to college.' There's students who just don't want to, and there's students who are not qualified to when they graduate."

However, the good news is that Archibald Palin High School has noticed this distressing trend among some students and has begun to offer a more balanced curriculum. This is why mindfulness activities have been incorporated into the school day. This is also why the school has extended the opportunity for students to tour not only college campuses but also trade schools, which may be of far greater interest for some students. Xavier said:

"We took students to the local electrical workers union. We took students to the fire department, the police academy ... all of which can lead our students who don't feel that college is for them to, like, a very comfortable pathway to the middle class ... I think experiential learning rather than just full-on academic classroom learning is something that students need to experience."

Paul said that he will work endlessly for this trend at Archibald Palin High School to continue:

"To me, what we want to be doing here is making sure that all of our kids have options, and that is, you know, all of our kids can ideally go to college if that's what they want to do. And the kids who just need a push, we should give them that push, but if they really are not interested, like, it is our responsibility to make sure they're not just going to, like, go work at McDonald's, 'cause there's a lot of better things."

Ultimately, in the teachers' view, a more balanced curriculum, exposure to multiple options, and a healthy school community will assist their black and Latinx students achieve their best potential and optimal emotional state.

Chapter 5:

Conclusions

5.1: Discussion

Much of the findings from the counselors' and teachers' interviews were in line with my literature review. In regards to stressors and background, the counselors and teachers acknowledged that their black and Latinx students often come from economically underprivileged backgrounds or from families with more than one child (Burke, Gabe, Rimkunas, & Griffith, 1985, as cited in Garrison, 1999; Krogstad, 2014; Zambrana, 2011). That background status seems to be related to significant stress on students' mental health and personal time. The counselors and teachers also acknowledged how many of their Latinx students at Archibald Palin High School are from Mexican descent and immigrant families, which means that these students fit into the 63% of Latinxs in the United States that are of Mexican origin (Flores, 2017).

The counselors and teachers also said that they have seen how their black and Latinx students have struggled to express their emotions, which is indicative of personal stigma (DeFreitas et al., 2018) because they are afraid to be perceived as weak or vulnerable. Furthermore, the counselors and teachers noted that their black and Latinx students often struggle to seek out mental health resources and to communicate with their families about their mental health, which may be indicative of perceived stigma (DeFreitas et al., 2018) or the understanding of their community's general rejection of mental illness. Indeed, these behaviors, as my participants acknowledged, could be due to mental health stigma being especially prevalent among black and Latinx communities (Corrigan & Watson, 2007; DeFreitas et al., 2018; Fripp & Carlson, 2017; Jimenez, Bartels, & Cardenas, 2013; Magaña, Ramírez García,

Hernández, & Cortez, 2007; Matthews et al., 2006, as cited in DeFreitas et al., 2018; Mishra et al., 2009; Villatoro et al., 2018). However, another possible explanation for this trend may be acculturation and acculturative stress – most specifically, the Latinx immigrant students exhibiting values of their generation that are different from their parents’ values of their generation (Berry & Annis, 1974; Berry et al., 1986, as cited in Gonzales et al., 2009; Dinh et al., 2002; Gonzales et al., 2006; Gonzales et al., 2009; Kurtines & Szapocznik, 1996, as cited in Gonzales et al., 2009; Samaniego & Gonzales, 1999; Szapocznik et al., 1990, as cited in Gonzales et al., 2009). In a similar vein, the counselors and teachers expressed how their Latinx students in particular exhibit values of familism (Gaines et al., 1997; Hidalgo 1998; Hurtado, 1995; Trueba 1999, as cited in Zambrana, 2011) and thus are greatly affected by their parents’ affection and understanding or lack thereof (Garcia, Skay, Sieving, Naughton, & Bearinger, 2008).

Perhaps most strikingly, the counselors and teachers readily praised Archibald Palin High School for striving to uphold diversity and create a caring environment. Many of the counselors and teachers addressed how they want to acknowledge and respect cultural differences and facets of identity (including ethnic identity) in their work with their black and Latinx students. In this way, the counselors and teachers believed they are able to instill social justice values in their black and Latinx students and make their black and Latinx students feel safe. All of these insights are indicative of how counselors and teachers are keenly aware of how black and Latinx students’ comfort in their ethnic identity and engagement with non-judgmental peers affect their wellbeing (Blum & Rinehart, 1997; Cokley & Chapman, 2008; Franklin-Jackson & Carter, 2007; Jones, Cross, & DeFour, 2007; Mandara et al., 2009; McClain et al., 2016).

However, even though the counselors and teachers knew about the importance of ethnic identity's effect on students in school, the counselors and teachers emphasized more so how Archibald Palin High School's caring environment makes the most difference in their black and Latinx students' wellbeing. This reflects well on the findings of Bains and colleagues (2014). The counselors and teachers at Archibald Palin High School administer restorative justice practices so that their black and Latinx students maintain their autonomy. Furthermore, the counselors and teachers are sure to be proactive in intervening on their black and Latinx students' behalf, and they emphasize to their black and Latinx students that they as professionals are trustworthy and willing to help all students with whatever they need.

The counselors and teachers also try to break the cycle of ignorance surrounding mental health by being open about their own mental health experiences and by encouraging their students to participate in mental wellness activities among groups of students who have similar mental health symptoms. These strategies have been demonstrated by McMullen and colleagues (2013) and Kataoka and colleagues (2003) to be useful. Lastly, the counselors offer mental health resources to their black and Latinx students' parents so that they can understand and connect with their children in effective ways. This strategy is executed with the awareness that close connections with family members help black and Latinx individuals' mental health (Brakefield et al., 2012; Conger et al., 2002; Elkington et al., 2011; Garcia et al., 2008; Hammock et al., 2004; Voisin et al., 2016). Overall, according to the counselors and teachers, it is because of this caring environment at Archibald Palin High School that the black and Latinx students are better able to express themselves, help one another, and feel part of their school community. This effect highlights how Blum and Rinehart (1997) found that students' feelings

of connectiveness to their school and feelings of acceptance from their peers greatly improve their welfare.

While all of these points mentioned above aligned with my literature review, there were two noticeable differences between the counselors' and teachers' responses and my literature review. First, even though the counselors and teachers mentioned how comfort in ethnic identity and school help black and Latinx students' mental welfare, they did not mention how these variables affect black and Latinx students' grades (as would have been suggested by Alva, 1991; Castro-Olivo et al., 2016; Cokley & Chapman, 2008; Gonzalez & Padilla, 1997; Goodenow, as cited in Gonzalez & Padilla, 1997; Mandara et al., 2009). This point may have been addressed had I added a question in my interviews on how mental health and grades are linked. Second, throughout my literature review, I found no evidence of a rigorous, academic-focused environment having a deleterious effect on black and Latinx students' mental health, even though the counselors and teachers highly emphasized this point. It is possible, then, that more research needs to be done on how academic curriculum can improve or deplete black and Latinx students' mental health.

5.2: Limitations

When considering limitations, I would have interviewed counselors and teachers at multiple schools in Texas, in addition to Archibald Palin High School, so that I could study a greater sample of perspectives. Ideally, I would have chosen schools with different student populations and income levels. I would have chosen a private school, a school with a majority-white student population, and a school with a majority-black student population. In this way, I could see how these school environments may have contributed to experiences that were

different from those at Archibald Palin High School, a school with a majority-Latinx student population. Even though some of the counselors and teachers in my study talked about their experiences at other schools, hearing directly from counselors and teachers who still work at those schools would have provided more richness to my data.

5.3: Closing Remarks

Archibald Palin High School's counselors and teachers exhibit the sort of multicultural awareness that allows them to be effective instructors and guides for their black and Latinx students. These counselors and teachers have educated themselves on the stressors that many of their black and Latinx students experience. They are therefore prepared to care for their black and Latinx students' mental health in concrete ways, and they are able to readily address the stigma and the inequities that are stacked against their black and Latinx students. In doing so, they nurture their black and Latinx students in ways that educators who are not multiculturally aware could never do. The counselors and teachers at Archibald Palin High School are also conscious of how they merely want to direct – not rule over – their black and Latinx students so that they can grow into well-rounded, self-sufficient adults. Through all of these actions, the counselors and teachers at Archibald Palin High School are giving their black and Latinx students the opportunity they deserve. Consequently, it is my hope that these counselors and teachers may serve as a template for other educators to follow. Indeed, educators in the school system can serve as a powerful tool to improve black and Latinx students' potential and, consequently, racial justice within our society.

References

- Ali, M. M., Dwyer, D. S., Vanner, E. A., & Lopez, A. (2010). Adolescent propensity to engage in health risky behaviors: The role of individual resilience. *International Journal of Environmental Research and Public Health*, 7, 2161-2176.
- Alismail, H. A. (2016). Multicultural education: Teachers' perceptions and preparation. *Journal of Education and Practice*, 7(11), 139-146.
- Alva, S. A. (1991). Academic invulnerability among Mexican-American students: The importance of protective resources and appraisals. *Hispanic Journal of Behavioral Sciences*, 13(1), 18-34.
- Añez, L. M., Silva, M. A., Paris Jr, M., & Bedregal, L. E. (2008). Engaging Latinos through the integration of cultural values and motivational interviewing principles. *Professional Psychology: Research and Practice*, 39(2), 153-159.
- Antshel, K. M. (2002). Integrating culture as a means of improving treatment adherence in the Latino population. *Psychology, Health, and Medicine*, 7, 435-449.
- Artiga, S., Foutz, J., & Damico, A. (2016). *Health coverage by race and ethnicity: Examining changes under the ACA and the remaining uninsured*. Retrieved from <https://www.kff.org/disparities-policy/issue-brief/health-coverage-by-race-and-ethnicity-changes-under-the-aca/>.
- Bains, R. M., Franzen, C. W., & White-Frese, J. (2014). Engaging African American and Latino adolescent males through school-based health centers. *The Journal of School Nursing*, 30(6), 411-419.
- Barshay, Jill. (2018). *Behind the Latino college degree gap*. Retrieved from <https://hechingerreport.org/behind-the-latino-college-degree-gap/>.

- Berry, J. W., & Annis, R. C. (1974). Acculturative stress: The role of ecology, culture and differentiation. *Journal of Cross-Cultural Psychology*, 5, 382-406.
- Bialik, K. (2018). 5 facts about blacks in the U.S. Retrieved from <http://www.pewresearch.org/fact-tank/2018/02/22/5-facts-about-blacks-in-the-u-s/>.
- Blum, R. W., & Rinehart, P. M. (1997). *Reducing the risk: Connections that make a difference in the lives of youth*. Retrieved from <https://files.eric.ed.gov/fulltext/ED412459.pdf>.
- Brakefield, T., Wilson, H., & Donenberg, G. (2012). Maternal models of risk: Links between substance use and risky sexual behavior in African American female caregivers and daughters. *Journal of Adolescence*, 35(4), 959-968.
- Caldwell, C. H., Antonucci, T. C., Jackson, J. S., Wolford, M. L., & Osofsky, J. D. (1997). Perceptions of parental support and depressive symptomatology among Black and White adolescent mothers. *Journal of Emotional and Behavioral Disorders*, 5, 173-183.
- Caldwell, C. H., Zimmerman, M. A., Bernat, D. H., Sellers, R. M., & Notaro, P. C. (2002). Racial identity, maternal support, and psychological distress among African American adolescents. *Child Development*, 73, 1322-1336.
- Castro-Olivo, S. M., Cramer, K., & Garcia, N. M. (2016). Manualized school-based social-emotional curricula for ethnic minority populations. In S. L. Graves & J. J. Blake (Eds.), *Psychoeducational assessment and intervention for ethnic minority children: Evidence-based approaches* (pp. 183-196). New York: American Psychological Association.
- Clance, P. R., & Imes, S. A. (1978). The imposter phenomenon in high achieving women: Dynamics and therapeutic interventions. *Psychotherapy: Theory, Research, and Practice*, 15, 241-247.

- Cokley, K. O., & Chapman, C. (2008). The roles of ethnic identity, anti-white attitudes, and academic self-concept in African American student achievement. *Social Psychology of Education, 11*(4), 349-365.
- Cokley, K. O., Komarraju, M., Patel, N., Piedrahita, S., Rosales, R., Castillon, J., ... & Pang, L. (2004). Construction and initial validation of the student—professor interaction scale (SPIS). *The College Student Affairs Journal, 24*(1), 32-50.
- Cokley, K. O., Komorraju, M., Rosales, R., Shen, F., Pickett, R., & Patel, N. (2006). Assessing quality of student-faculty interactions. *Journal of the Professoriate, 1*(2), 55-67.
- Conger, R. D., Wallace, L. E., Sun, Y., Simons, R. L., McLoyd, V. C., & Brody, G. H. (2002). Economic pressure in African American families: A replication and extension of the family stress model. *Developmental Psychology, 38*(2), 179-193.
- Corrigan, P. W., & Watson, A. C. (2007). The stigma of psychiatric disorders and the gender, ethnicity and education of the perceiver. *Community Mental Health, 43*, 439-457.
- Crotty, M. (2015). *The foundations of social research*. Los Angeles: Sage Publications.
- DeFreitas, S. C., Crone, T., DeLeon, M., & Ajayi, A. (2018). Perceived and personal mental health stigma in Latino and African American college students. *Frontiers in Public Health, 66*, 1-10.
- Dinh, K. T., Roosa, M. W., & Tein, J. Y., & Lopez, V. A. (2002). The relationship between acculturation and problem behavior proneness in a Hispanic youth sample: A longitudinal mediation model. *Journal of Abnormal Child Psychology, 30*(3), 295-309.
- Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development, 82*, 405-432.

- Elkington, K. S., Bauermeister, J. A., & Zimmerman, M. A. (2011). Do parents and peers matter? A prospective socio-ecological examination of substance use and sexual risk among African American youth. *Journal of Adolescence*, 34(5), 1035-1047.
- Flores, A. (2017). *How the U.S. Hispanic population is changing*. Retrieved from <http://www.pewresearch.org/fact-tank/2017/09/18/how-the-u-s-hispanic-population-is-changing/>.
- Fox, H. B., McManus, M. A., Zarit, M., Fairbrother, G., Cassedy, A. E., Bethell, C. D., & Read, D. (2007). *Racial and ethnic disparities in adolescent health and access to care* (No. Fact Sheet No. 1). Washington, D.C.: The National Alliance to Advance Mental Health.
- Franklin-Jackson, D., & Carter, R. T. (2007). The relationships between race-related stress, racial identity, and mental health for Black Americans. *Journal of Black Psychology*, 33(1), 5-26.
- Fripp, J. A., & Carlson, R. G. (2017). Exploring the influence of attitude and stigma on participation of African American and Latino populations in mental health services. *Journal of Multicultural Counseling and Development*, 45(2), 80-94.
- Gaines, S. O., Marelich, W. D., Bledsoe, K. L., Steers, W. N., Henderson, M. C., Granrose, C. S. (1997). Links between race/ethnicity and cultural values as mediated by race/ethnic identity and moderated by gender. *Journal of Personality and Social Psychology*, 72, 1460–1476
- Garcia, C., Skay, C., Sieving, R., Naughton, S., & Bearinger, L. H. (2008). Family and racial factors associated with suicide and emotional distress among Latino students. *Journal of School Health*, 78(9), 487-495.
- Garcia-Joslin, J. J., Carrillo, G. L., Guzman, V., Vega, D., Plotts, C. A., & Lasser, J. (2016).

- Latino immigration: Preparing school psychologists to meet students' needs. *School Psychology Quarterly*, 31(2), 256-269.
- Garrison, E. G., Roy, I. S., & Azar, V. (1999). Responding to the mental health needs of Latino children and families through school-based services. *Clinical Psychology Review*, 19(2), 199-219.
- Gérman, M., Gonzales, N. A., & Dumka, L. E. (2009). Familism values as a protective factor for Mexican-origin adolescents exposed to deviant peers. *Journal of Early Adolescence*, 29, 16-42.
- Givens, J. L., Katz, I. R., Bellamy, S., & Holmes, W. C. (2007). Stigma and the acceptability of depression treatments among African Americans and Whites. *Journal of General Internal Medicine*, 22(9), 1292-1297.
- Gonzales, N. A., Deardorff, J., Formoso, D., Barr, A., & Barrera, M. (2006). Family mediators of the relation between acculturation and adolescent mental health. *Family Relations*, 55, 318-330.
- Gonzales, N. A., Fairlee, C. F., & Knight, G. P. (2009). Acculturation, enculturation, and the psychosocial adaptation of Latino youth. In F. A. Villarruel, G. Carlo, J. M. Grau, M. Azmitia, N. J. Cabrera, & T. J. Chahin (Eds). *Handbook of US Latino psychology: Development and community-based perspectives* (pp. 115-134). Thousand Oaks: Sage.
- Gonzalez, R., & Padilla, A. M. (1997). The academic resilience of Mexican American high school students. *Hispanic Journal of Behavioral Sciences*, 19(3), 301-317.
- Griner, D., & Smith, T. B. (2006). Culturally adapted mental health interventions: A meta-analytic review. *Psychotherapy: Theory, Research, Practice, Training*, 43, 531-548.
- Hammack, P. L., Richards, M. H., Luo, Z., Edlynn, E. S., & Roy, K. (2004). Social support

- factors as moderators of community violence exposure among inner-city African American young adolescents. *Journal of Clinical Child and Adolescent Psychology*, 33, 450-462.
- Heilemann, M. S., Frutos, L., Lee, K. A., & Kurry, F. S. (2004). Protective strength factors, resources, and risks in relation to depressive symptoms among childbearing women of Mexican descent. *Health Care for Women International*, 25, 88-106.
- Jimenez, D. E., Bartels, S. J., Cardenas, V., Alegria, M. (2013). Stigmatizing attitudes toward mental illness among racial/ethnic older adults in primary care. *International Journal of Geriatric Psychiatry*, 28(10), 1061-1068.
- Johnson, E. H., & Greene, A. F. (1991). The relationship between suppressed anger and psychological distress in African American male adolescents. *Journal of Black Psychology*, 18, 47-65.
- Jones, H. L., Cross Jr, W. E., & DeFour, D. C. (2007). Race-related stress, racial identity attitudes, and mental health among Black women. *Journal of Black Psychology*, 33(2), 208-231.
- Jones, S. M., Brown, J. L., & Aber, J. L. (2011). Two-year impacts of a universal school-based social—emotional and literacy intervention: An experiment in translational development research. *Child Development*, 82, 533-554.
- Kataoka, S. H., Stein, B. D., Jaycox, L. H., Wong, M., Escudero, P., Tu, W., ... & Fink, A. (2003). A school-based mental health program for traumatized Latino immigrant children. *Journal of the American Academy of Child & Adolescent Psychiatry*, 42(3), 311-318.
- Krogstad, J. M. (2014). *Hispanics only group to see its poverty rate decline and*

- incomes rise*. Retrieved from <http://www.pewresearch.org/fact-tank/2014/09/19/hispanics-only-group-to-see-its-poverty-rate-decline-and-incomes-rise/>.
- Lopez, M. H., Krogstad, J. M., & Flores, A. (2018). *Key facts about young Latinos, one of the nation's fastest-growing populations*. <http://www.pewresearch.org/fact-tank/2018/09/13/key-facts-about-young-latinos/>.
- Magaña, S. M., Ramírez García, J. I., Hernández, M. G., & Cortez, R. (2007). Psychological distress among Latino family caregivers of adults with schizophrenia: The roles of burden and stigma. *Psychiatric Services*, 58(3), 378-384.
- Mandara, J., Gaylord-Harden, N. K., Richards, M. H., & Ragsdale, B. L. (2009). The effects of changes in racial identity and self-esteem on changes in African American adolescents' mental health. *Child Development*, 80(6), 1660-1675.
- Martinez, R. O., & Dukes, R. L. (1997). The effects of ethnic identity, ethnicity, and gender on adolescent well-being. *Journal of Youth and Adolescence*, 26, 503-516.
- Matthews, D. B., & Odom, B. L. (1989). Anxiety: A competent of self-esteem. *Elementary School Guidance and Counseling*, 24, 153-159.
- McClain, S., Beasley, S. T., Jones, B., Awosogba, O., Jackson, S., & Cokley, K. (2016). An examination of the impact of racial and ethnic identity, impostor feelings, and minority status stress on the mental health of Black college students. *Journal of Multicultural Counseling and Development*, 44(2), 101-117.
- McMullen, J., O'Callaghan, P., Shannon, C., Black, A., & Eakin, J. (2013). Group trauma-focused cognitive-behavioural therapy with former child soldiers and other war-affected boys in the DR Congo: A randomised controlled trial. *Journal of Child Psychology and Psychiatry*, 54(11), 1231-1241.

- Merrell, K. W. (2010). Linking prevention science and social and emotional learning: The Oregon Resiliency Project. *Psychology in the Schools, 47*, 55-70.
- Mishra, S. I., Lucksted, A., Gioia, D., Barnett, B., & Baquet, C. R. (2009). Needs and preferences for receiving mental health information in an African American focus group sample. *Community Mental Health Journal, 45*(2), 117-126.
- Moll, L. C., & González, N. (1997). Teachers as social scientists: Learning about culture from household research. In Peter M. Hall (Ed.), *Race, ethnicity, and multiculturalism: Policy and practice* (pp. 89-114). New York and London: Routledge.
- Nadeem, E., Lange, Edge, D., Fongwa, M., Belin, T., & Miranda, J. (2007). Does stigma keep poor young immigrant and U.S.-born Black and Latina women from seeking mental health care? *Psychiatric Services, 58*(12), 1547-1554.
- Najaka, S. S., Gottfredson, D. C., & Wilson, D. B. (2001). A meta-analytic inquiry into the relationship between selected risk factors and problem behavior. *Prevention Science, 2*, 257-271.
- National Center for Education Statistics. N.d. *What are the new back to school statistics for 2018?* Retrieved from <https://nces.ed.gov/fastfacts/display.asp?id=372>.
- Newell, M. (2016). Consultation-based intervention services for racial minority students. In S. L. Graves & J. J. Blake (Eds.), *Psychoeducational assessment and intervention for ethnic minority children: Evidence-based approaches* (pp. 197-211). New York: American Psychological Association.
- Okagaki, L., and Frensch, P. A. (1998). Parental support for Mexican-American children's school achievement. In H. I. McCubbin, E. A. Thompson, A. I. Thompson, & J. E. Fromer (Eds.). *Resiliency in Native American and Immigrant Families* (Vol. 2, pp. 325-

342). Thousand Oaks: Sage.

- Okagaki, L., Frensch, P. A., & Gordon, E. W. (1994). Encouraging school achievement in Mexican-American children. *Hispanic Journal of Behavioral Sciences*, 17(2), 160-179.
- Pattyn, E., Verhaeghe, M., Sercu, C., & Bracke, P. (2014). "Public stigma and self-stigma: Differential association with attitudes toward formal and informal help seeking." *Psychiatric Services*, 65(2), 232-238.
- Phinney, J. S. (1990). Ethnic identity in adolescents and adults: A review of research. *Psychological Bulletin*, 108, 499-514.
- Phinney, J. S. (1996). When we talk about American ethnic groups, what do we mean? *American Psychologist*, 51(9), 918-927.
- Phinney, J. S., Cantu, C. L., & Kurtz, D. A. (1997). Ethnic and American identity a predictors of self-esteem among African American, Latino, and White adolescents. *Journal of Clinical Child and Adolescent Psychology*, 33(2), 227-236.
- Ponterotto, Joseph G. (2010). Qualitative research in multicultural psychology: Philosophical Underpinnings, popular approaches, and ethical considerations. *Cultural Diversity and Ethnic Minority Psychology*, 16(4), 581-589.
- Proctor, S. L., & Simpson, C. (2016). Improving service delivery to ethnic and racial minority students through multicultural program training. In S. L. Graves & J. J. Blake (Eds.), *Psychoeducational assessment and intervention for ethnic minority children: Evidence-based approaches* (251-265). New York: American Psychological Association.
- Richman, L. S., Kohn-Wood, L. P., & Williams, D. R. (2007). The role of discrimination and racial identity for mental health service utilization. *Journal of Social and Clinical Psychology*, 26(8), 960-981.

- Rosenthal, G., Folse, E. J., Allerman, N. W., Bouderaux, D., Soper, B., & Von Bergen, C. (2000). The one-to-one survey: Traditional versus non-traditional student satisfaction with professors during one-to-one contacts. *College Student Journal, 14*, 315-321.
- Rowley, S. J., Sellers, R. M., Chavous, T. M., & Smith, M. A. (1998). The relationship between racial identity and self-esteem in African American college and high school students. *Journal of Personality and Social Psychology, 3*, 715-724.
- Sabogal, F., Pérez-Stable, E. J., Otero-Sabogal, R., & Hiatt, R. A. (1995). Gender, ethnic, and acculturation differences in sexual behaviors: Hispanic and non-Hispanic White adults. *Hispanic Journal of Behavioral Sciences, 17*(2), 139-159.
- Samaniego, R. Y., & Gonzales, N. A. (1999). Multiple mediators of the effects of acculturation status on delinquency for Mexican American adolescents. *American Journal of Community Psychology, 27*(2), 189-209.
- Schwartz, S. J. (2007). The applicability of familism to diverse ethnic groups: A preliminary study. *The Journal of Social Psychology, 147*(2), 101-118.
- Sellers, R. M., Copeland-Linder, M., Martin, P. P., & Lewis, R. L. (2006). Racial identity matters: The relationship between racial discrimination and psychological functioning in African American adolescents. *Journal of Research on Adolescence, 16*, 187-216.
- Serbin, L. A., & Karp, J. (2004). The intergenerational transfer of psychological risk: Mediators of vulnerability and resilience. *Annual Review of Psychology, 55*(1), 333-363.
- Sleeter, C. E. (2001). Preparing teachers for culturally diverse schools: Research and the overwhelming presence of whiteness. *Journal of Teacher Education, 52*(2), 94-106.
- Smedley, B. D., Myers, H. F., & Harrell, S. P. (1993). Minority-status stresses and the college adjustment of ethnic minority freshmen. *The Journal of Higher Education, 64*, 434-452.

- Smith, T. B., & Silva, L. (2011). Ethnic identity and personal well-being of people of color: A meta-analysis. *Journal of Counseling Psychology*, 58, 42-60.
- Sullivan, A. L., & Simonson, G. R. (2015). A systematic review of school-based social-emotional interventions for refugee and war-traumatized youth. *Review of Educational Research*, 86(2), 503-530.
- Townsend, T. G., & Hargrove, S. (2016). Implementing community-based research and prevention programs to decrease health disparities. In S. L. Graves & J. J. Blake (Eds.), *Psychoeducational assessment and intervention for ethnic minority children: Evidence-based approaches* (213-230). New York: American Psychological Association.
- Turner, E. A., & Llamas, J. D. (2017). The role of therapy fears, ethnic identity, and spirituality on access to mental health treatment among Latino college students. *Psychological Services*, 14(4), 524-530.
- Umaña-Taylor, A. J. & Alfaro, E. C. (2009). Acculturative stress and adaptation. In F. A. Villarruel, G. Carlo, J. M. Grau, M. Azmitia, N. J. Cabrera, & T. J. Chahin (Eds.), *Handbook of US Latino psychology: Development and community-based perspectives* (pp. 135-152). Thousand Oaks: Sage.
- Umaña-Taylor, A. J., Yazedijan, A., & Bámaca-Gomez, M. Y. (2004). Developing the Ethnic Identity Scale using Eriksonian and social identity perspectives. *Identity: An International Journal of Theory and Research*, 4, 9-38.
- Unger, J. B., Kipke, M. D., Simon, T. R., Montgomery, S. B., & Johnson, C. J. (1997). Homeless youths and young adults in Los Angeles: Prevalence of mental health problems and the relationship between mental health and substance abuse disorders. *American Journal of Community Psychology*, 25, 371-394.

- Valeriu, D. (2017). Teacher training for multicultural classroom teaching. *Euromentor Journal*, 8(4), 71-81.
- Villatoro, A. P., DuPont-Reyes, M. J., Phelan, J. C., Painter, K., & Link, B. G. (2018). Parental recognition of preadolescent mental health problems: Does stigma matter? *Social Science & Medicine*, 216, 88-96.
- Voisin, D. R., Elsaesser, C., Kim, D. H., Patel, S., & Cantara, A. (2016). The relationship between family stress and behavioral health among African American adolescents. *Journal of Child and Family Studies*, 25, 2201-2210.
- Walker, S. C., Kerns, S. E. U., Lyon, A. R., Bruns, E. J., & Cosgrove, T. J. (2009). Impact of School-Based Mental Health Center use on academic outcomes. *Journal of Adolescent Health*, 46(3), 251-257.
- Williams, C. L., & Berry, J. W. (1991). Primary prevention of acculturative stress among refugees: Application of psychological theory and practice. *American Psychologist*, 46, 632-641.
- Williams, M., Chapman, L., Wong, J., & Turkheimer, E. (2012). The role of ethnic identity in symptoms of anxiety and depression in African Americans. *Psychiatry Research*, 199, 31-36.
- Zambrana, R. E. (2011). *Latinos in American society: Families and communities in transition*. Ithaca: Cornell University Press.

Biography

Anna Lee Carothers was born in Houston, Texas, on July 6, 1996. She lived her whole life in Houston until she chose to attend the University of Texas at Austin. From 2015 to 2019, Anna Lee majored in psychology (BA) and the Plan II Honors Program (BA). She also minored in educational psychology. In the summer of 2017, Anna Lee studied abroad at the University of Sussex in England and received course credit in health psychology and abnormal/clinical psychology. During her undergraduate years at the University of Texas at Austin, Anna Lee was constantly busy. She served first as the internal events coordinator and then as the president of the National Alliance on Mental Illness (NAMI) On Campus at UT Austin. She was a tutor for black and Latinx students. She also worked as an undergraduate research assistant for Dr. Toyin Falola, a professor of history and the Jacob & Frances Sanger Mossiker Chair in the Humanities at the University of Texas at Austin.

In May of 2019, Anna Lee graduated Phi Beta Kappa and is to attend the University of Texas at Austin to pursue a Master's of Education with Secondary Social Studies Certification, as part of the UTeach Urban Teachers program. She will also continue to work for Dr. Toyin Falola as a graduate research assistant, and she plans to stay active in the NAMI community at the campus, city, state, and national level.

After Anna Lee graduates with her Master's in 2021, she plans to teach for a few years and decide what to pursue next in the field of education. She can see herself teaching forever, obtaining a principal certification, or obtaining a doctorate in education policy or curriculum and development. She is also open to other possibilities as long as she feels fulfilled in what she does.